



CITY OF SAINT PAUL

Business Licensing
375 Jackson Street, Suite 220
Saint Paul, Minnesota 55101-1806

Telephone: 651-266-8989
Facsimile: 651-266-9124
Web: www.stpaul.gov/dsi

Sound Level Variance Application

Legislative Code Chapter 293. - Noise Regulations

Application and \$175 fee should be submitted a minimum of sixty (60) days prior to the event date to allow ample time for required public notification period and scheduling of a Council public hearing. Applications submitted within sixty (60) days of the event date may not satisfy the processing timeline requirements.

1. Organization/person seeking variance: MONSTER SERIES LLC.
2. Event Name: Women Rock 5K+10K.
3. Address and physical description of noise source location (Event, Worksite):
Upper Landing Park, South West Corner
4. Responsible person: JOHN LARSON Title: President
5. Telephone: 612-968-3224 E-Mail: TEAMORTHO@gmail.com
6. Date(s) variance requested: Aug 28, 2021
7. Noise source - Time(s) of operation: 8AM - NOON
- Time(s) of pre-event sound check: 7:45AM
8. Sound level requested (dBA/Decibels): 65 ?
9. Mailing address w/zip code: 15712 Forest Cir, Burnsville, MN 55306
10. Briefly describe the noise source and equipment involved: PA/Announcement system, two speakers placed as shown on the map facing away from Condos
11. Describe the steps that will be taken to minimize the noise levels:
speakers are faced away from the Condos.
12. State reason for seeking variance (example - music, announcements, construction, etc.):
announcements for race and some music
13. Maximum number of attendees: 250
14. Describe steps that will be taken to prevent COVID-19 virus spread: outdoor event.

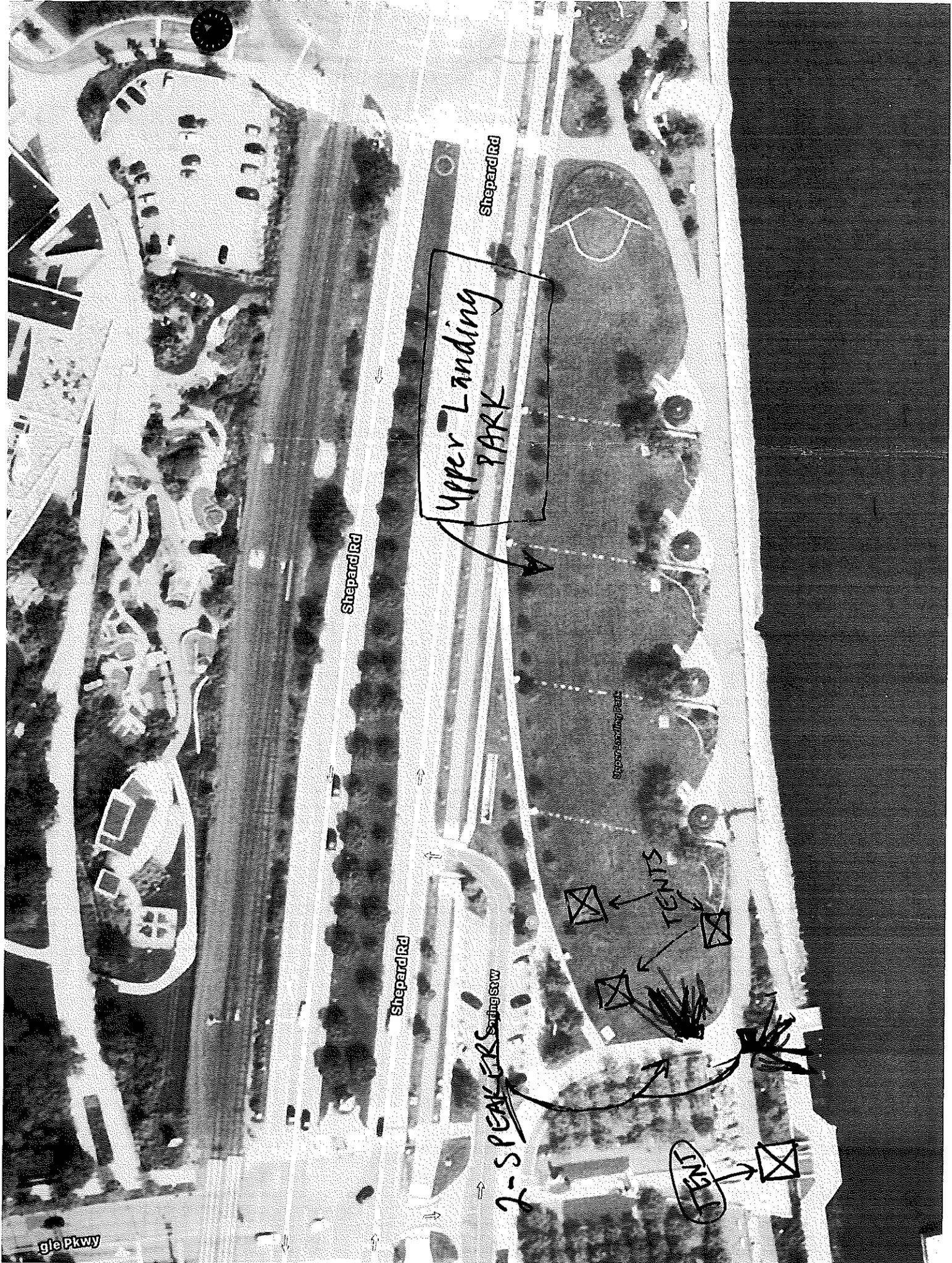
15. A site diagram & map must be attached showing location of noise source(s), streets, stages, tents, etc. (If there will be amplified sound, indicate location and direction that all speakers will be facing). Multiple locations may require more than one application.

16. Submit completed application, site diagram/map, and \$175.00 fee to:

CITY OF SAINT PAUL
DEPARTMENT OF SAFETY AND INSPECTIONS
375 JACKSON STREET, SUITE 220
SAINT PAUL, MN 55101-1806

I understand that any social gathering associated with this variance must be managed in full compliance with all applicable Governor Walz COVID-19 orders relating to distancing, masks and attendance limits.

Signature of responsible person: John W Larson Date: June 21, 2021



Upper Landing
PARK

Shepard Rd

Shepard Rd

Shepard Rd

2- SPEAKERS

Spring St W

Upper Landing Park

TENTS

TENT

gle Pkwy



DSI RECEIPT

CITY OF SAINT PAUL
Department of Safety and Inspections
375 Jackson Street Suite 220
Saint Paul, Minnesota 55101-1806
Phone: (651) 266-8989 Fax: (651) 266-9124
www.stpaul.gov/dsi

Date: 07/02/2021

Received From: MONSTER SERIES
8151 3RD AVE S UNIT 902E BLOOMINGTON MN 55425

Description:

Invoice Details

1109716

Noise Variance

Invoice Amount

\$175.00

Amount Paid

\$175.00

TOTAL AMOUNT PAID:

\$175.00

Paid By:

| Payment Type | Check # | Received Date | Amount |
|--------------|---------|---------------|----------|
| Check | 8430 | 07/02/2021 | \$175.00 |