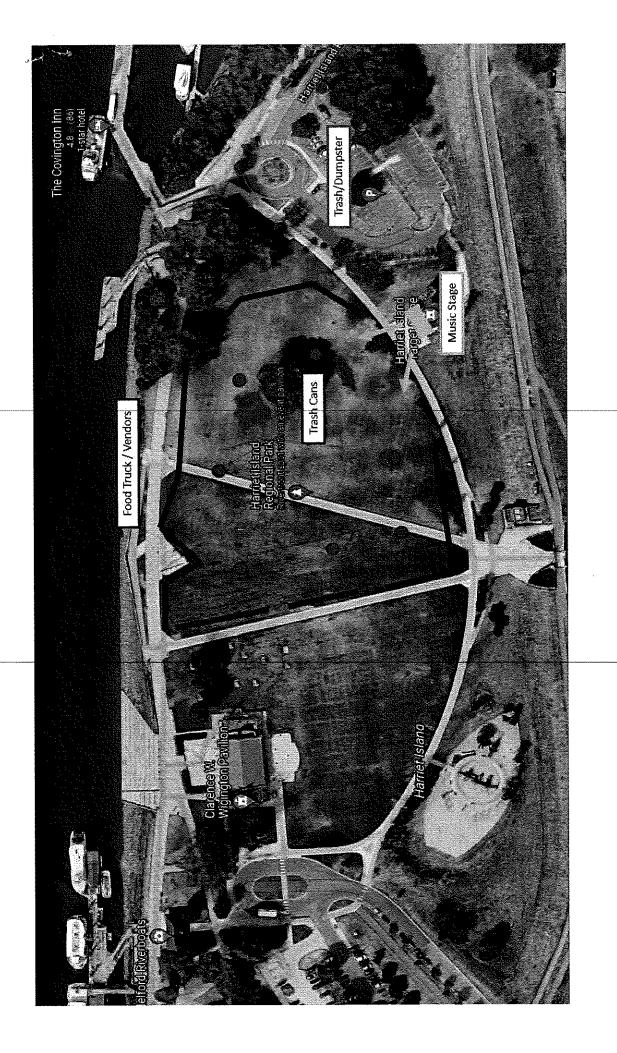


375 Jackson Street, Suite 220 Saint Paul, MN 55101-1806 Tel: 651-266-8989 | Fax: 651-266-9124

Sound Level Variance Application

Legislative Code Chapter 293. - Noise Regulations Application and \$178 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: Twin Cities Food Trucks, Inc				
2.	Event Name: Mid-Summer Food Truck Extravaganza				
	Address and physical description of noise source location (Event, Worksite): Harriet Island Rd, St Paul, 55107 It will be for an event.				
4.	Responsible person: Chai Xiong				
	Telephone: 651-888-0324				
	Date(s) variance requested: 07/15/202				
	Noise source - Time(s) of operation: 11:00 AM - 7:00 PM				
	- Time(s) of pre-event sound check: 11:00AM- 1:00PM. 12:00PM-2:00 PM, 3:00 PM -6:00 PM				
8.	Sound level requested (dBA/Decibels): 65				
	Mailing address w/zip code: 1093 Edgerton St., St. Paul, MN 55130				
	Briefly describe the noise source and equipment involved: Live music from the pavilion.				
	Describe the steps that will be taken to minimize the noise levels: We will only have the music loud bugh to be heard at the Pavilion and a little ways out while they eat.				
12. Mu	State reason for seeking variance (example - music, announcements, construction, etc.): Live				
13.	Maximum number of attendees: 3000				
14.	A <u>site diagram & map</u> 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.				
Ми	ltiple locations may require more than one application.)				
15.	Submit completed application, site diagram/map, and \$178 fee to: CITY OF SAINT PAUL, DEPARTMENT OF SAFETY AND INSPECTIONS 375 JACKSON STREET, SUITE 220 SAINT PAUL, MN 55101-1806				
18 CR 30 S	derstand any social gathering associated with this variance must be managed in compliance with applicable Mayor Carter executive order regarding vaccinations, distancing, masks and attendance its.				
Sig	nature of responsible person: Chai Xiong Digitally signed by Chai Xiong Date: 05/17/2023				





DSI RECEIPT

CITY OF SAINT PAUL

Department of Safety and Inspections 375 Jackson Street Suite 220 Saint Paul, Minnesota 55101-1806 Phone: (651) 266-9909 Fax: (651) 266-9124 www.stpaul.gow/dsi

Date: 06/12/2023

Received From: CHAI XIONG dba: TWIN CITIES FOOD TRUCKS (EGG ROLL QUEEN)

1093 EDGERTON ST ST PAUL MN 55130

Description:

Invoice Details

Invoice Amount

Amount Paid

1144929

Noise Variance

\$178.00

\$178.00

TOTAL AMOUNT PAID:

\$178.00

Paid By:

Payment Type	Check #	Received Date	Amount
Credit Card	MC1905	06/12/2023	\$178.00