

No check

AUG 13 2018



CITY OF SAINT PAUL
Christopher B. Coleman, Mayor

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

City of Saint Paul Noise Ordinance (Chapter 293)

Note: A public hearing before the Saint Paul City Council is required. Application and fee must be received no fewer than forty five (45) days prior to the public hearing date that is before the requested Variance start date.

- 1. Organization/person seeking variance: MN TRIO / Ka Zoua Xiong
- 2. Mailing Address w/zip code: 1501 Hennepin Ave mpls MN 55403
- 3. Responsible person: Ka Zoua Xiong Title: Program Director
- 4. Event Name: MN TRIO 5K Walk/Run
- 5. Telephone: 763-488-0459 E-Mail: kxiong@nhcc.edu
- 6. Date(s) during which the variance is requested: 9/30/18
- 7. Noise source - Time(s) of operation: 7am-2pm
- Time(s) of pre-event sound check: 7am
- 8. Address or legal description of Noise source: Kelley's Landing - 200 Dr. Justus Ohage Blvd
- 9. Sound level requested: open to what city limits for this area.
- 10. Briefly describe the noise source and equipment involved: see attached.

11. Describe the steps that will be taken to minimize the noise levels: We have a good relationship with our DJ and will have him comply with what's set by the city. All staff will be mindful of the sound and will turn down when needed.

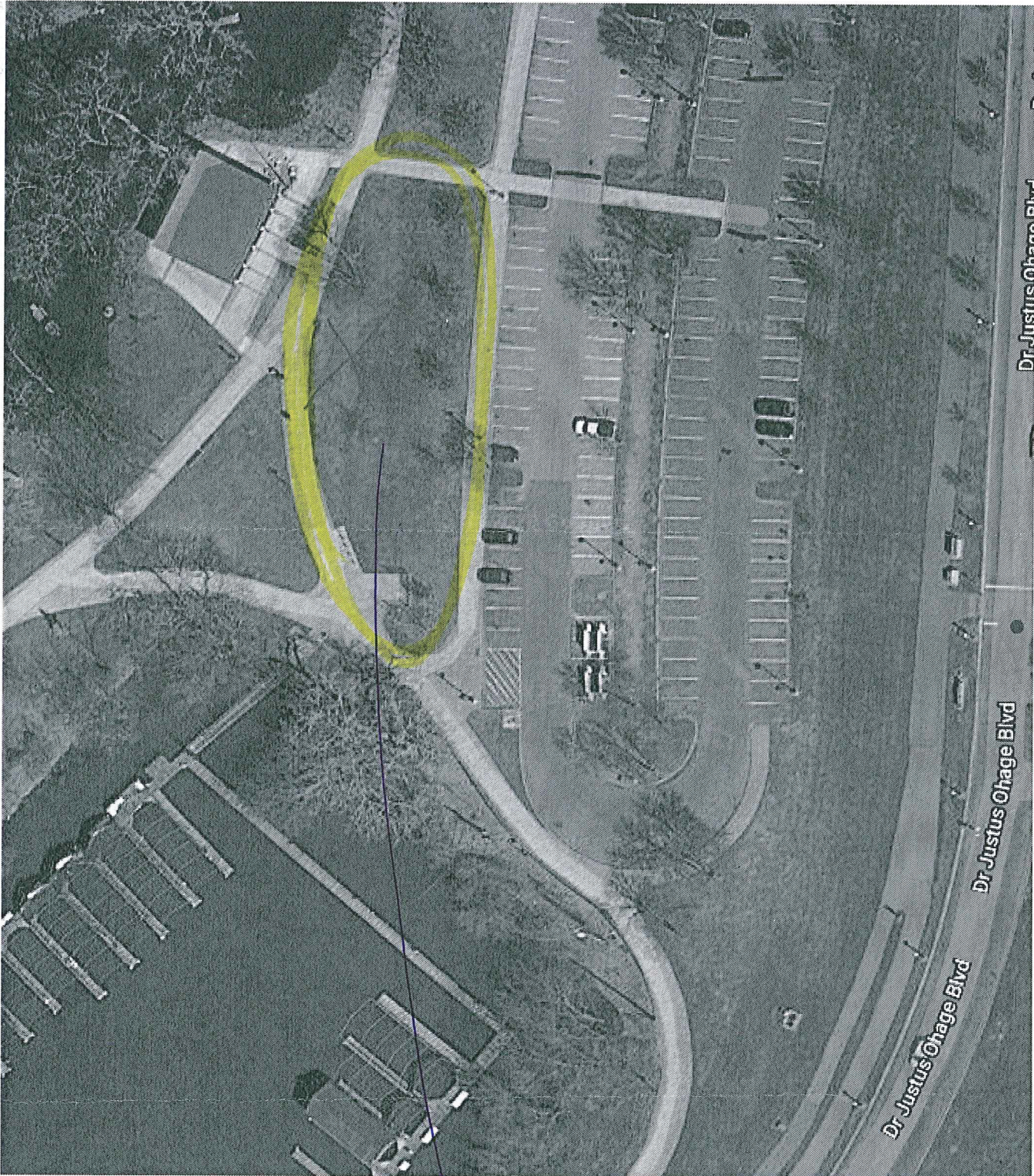
12. State reason for seeking variance (E.g. music, announcements, construction, etc.): We will use sound system to welcome our runners and provide entertainment for our spectators.

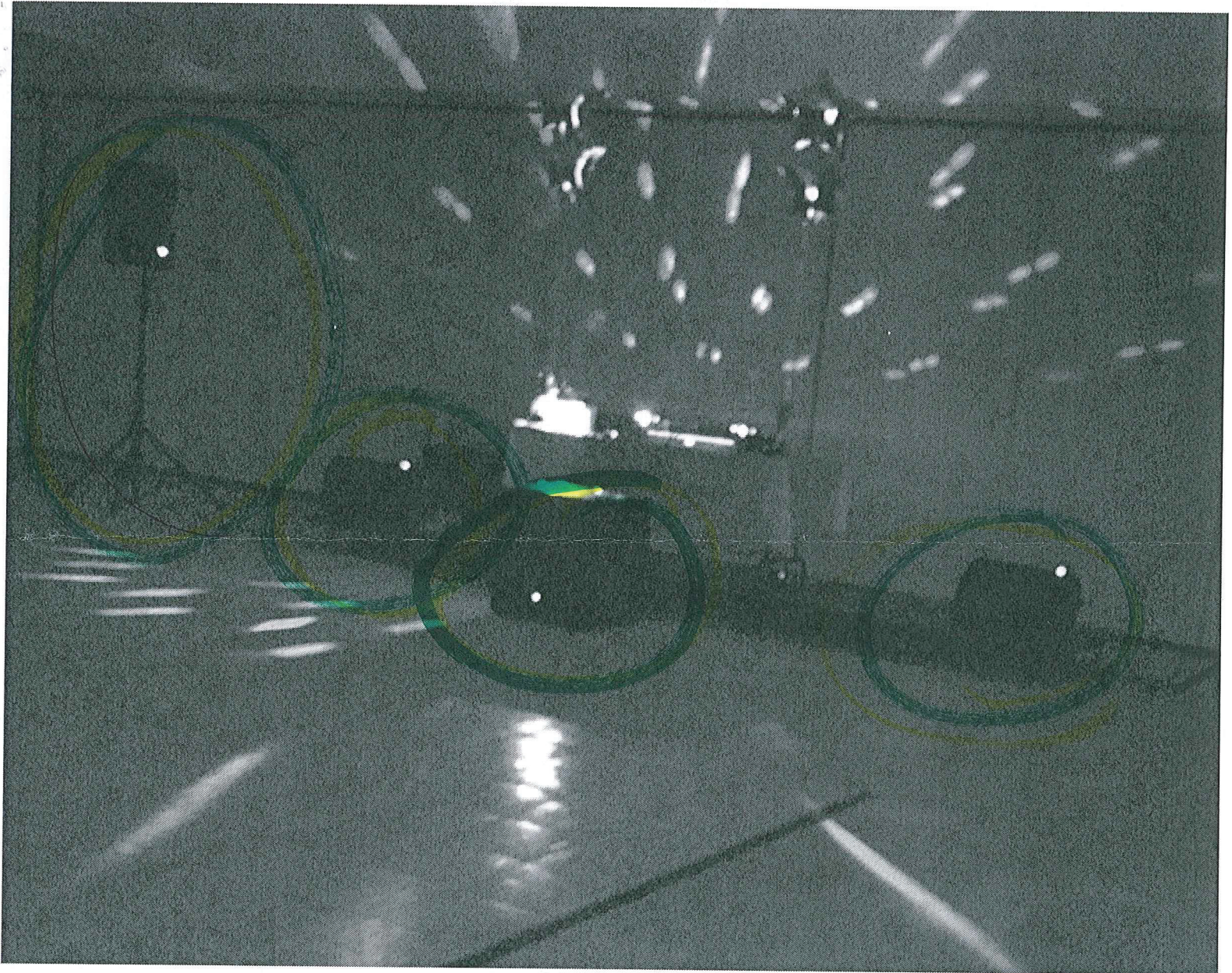
13. Attach site diagram showing location of noise source(s), streets, stages, tents, etc. (If there will be amplified sound, indicate location and direction that all speakers will be facing.) Multiple locations may require more than one application.

14. Return completed Application, Site Diagram, and \$172.00 fee to: **CITY OF SAINT PAUL**
DEPARTMENT OF SAFETY AND INSPECTIONS
375 JACKSON STREET, SUITE 220
SAINT PAUL, MN 55101-1806
Please contact Payong Kim for credit card payment (651)-793-1505

Signature of responsible person: [Signature] Date: 8/9/18

We are planning to
set up sound here.
If not, we
can use the
shelter areas as well.





These are the speakers we have. we will use whichever one is allowed by the city.



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: 08/15/2018

Received From: MN TRIO
1501 HENNEPIN AVE MINNEAPOLIS MN 55403

Description:

Invoice Details

1030271
Noise Variance

Invoice Amount

\$172.00

Amount Paid

\$172.00

TOTAL AMOUNT PAID:

\$172.00

Paid By:

Payment Type	Check #	Received Date	Amount
Credit Card	V8585	08/15/2018	\$172.00

DSI
375 JACKSON ST
STE 220
SAINT PAUL, MN. 55101-1806
651-266-9111

REPRINT

Phone Order

xxxxxxxxxxxx0585

VISA

Amount: \$

Tax: \$

Total: \$

Entry Method: Manual

172.00

0.00

172.00

08/15/18

Inv #: 000000001

Apprvd: Online

AVS Code:

CVV2 Code: MATCH M

08:36:52

Appr Code: 015706

Customer Copy

THANK YOU!