

E 3/30/22



SAINT PAUL
SAFETY & INSPECTIONS

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: Hampden Park Co-op
2. Event Name: Mayfest 2022
3. Address and physical description of noise source location (Event, Worksite): 928 Raymond Ave. We're hoping to have 1 or 2 musical acts play in our parking lot
4. Responsible person: Chuck Parson Title: General Manager
5. Telephone: 651-646-6686 E-Mail: _____
6. Date(s) variance requested: May ~~13th~~ 14th 2022
7. Noise source - Time(s) of operation: 11-4
- Time(s) of pre-event sound check: 10-11
8. Sound level requested (dBA/Decibels): 90-120
9. Mailing address w/zip code: 928 Raymond Ave. St. Paul, MN 55114
10. Briefly describe the noise source and equipment involved: A band of 2, with guitar amps + drums + vocals
11. Describe the steps that will be taken to minimize the noise levels: They will be playing facing our store's side, not facing the park or residences
12. State reason for seeking variance (example - music, announcements, construction, etc.): Music
13. Maximum number of attendees: About 150
14. 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.)
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

I understand any social gathering associated with this variance must be managed in compliance with any applicable Mayor Carter executive order regarding vaccinations, distancing, masks and attendance limits.

Signature of responsible person: Chuck Parson Date: 3-30-22

Apartment building

Alley way

drink truck

Parking lot

Food truck

MinPaw Vet Clinic

where band
will play

side walk

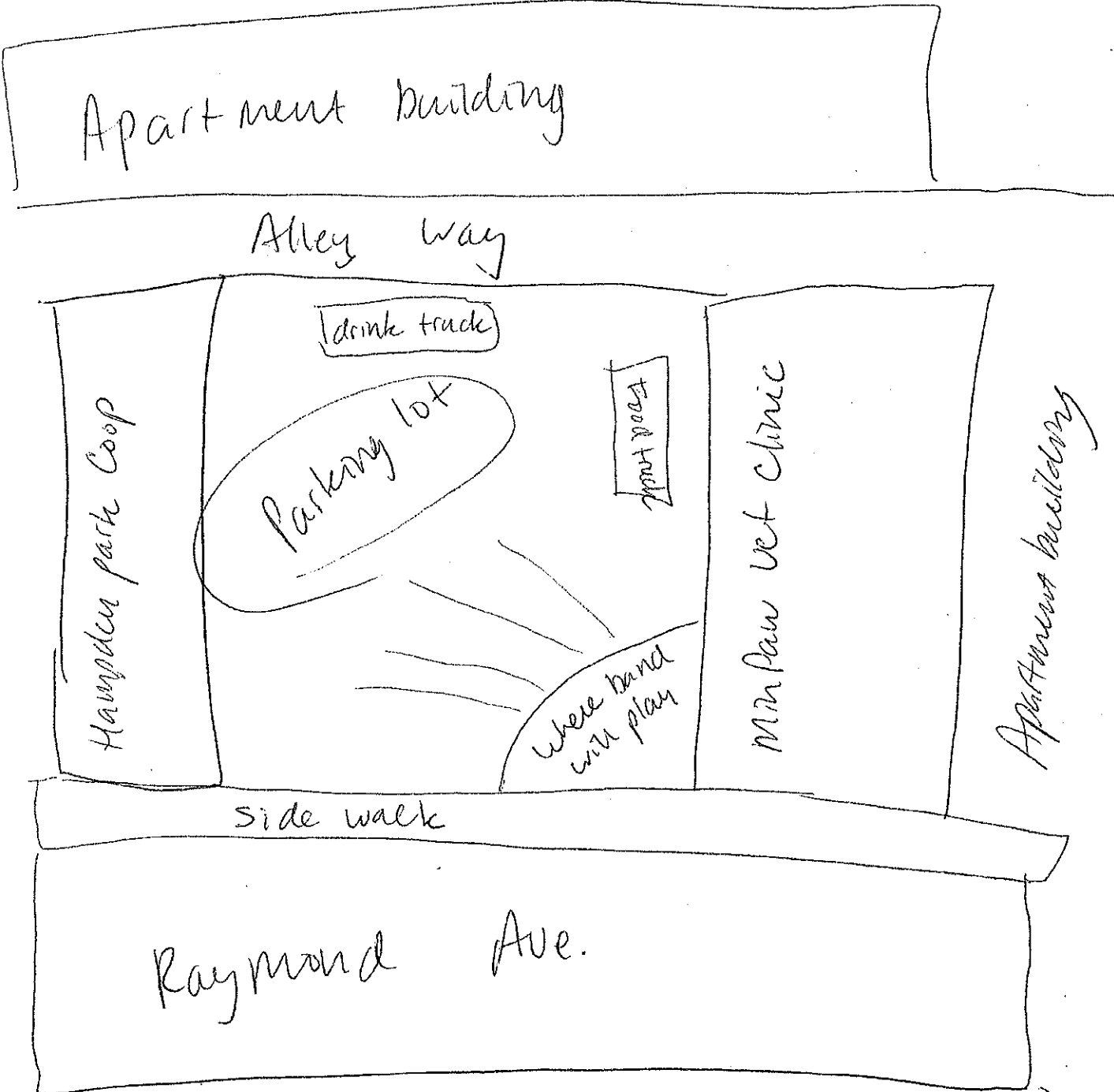
Raymond Ave.

St. Anthony Park

Hamden Ave

Hamden park Coop

Apartment building





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.sipaul.gov/dsi

Date: 04/01/2022

Received From: CHUCK PARSONS dba: HAMPDEN PARK CO-OP
928 RAYMOND AVE ST PAUL MN 55114

Description:

Invoice Details

1124645

Noise Variance

Invoice Amount

\$178.00

Amount Paid

\$178.00

TOTAL AMOUNT PAID:

\$178.00

Paid By:

Payment Type	Check #	Received Date	Amount
Credit Card	MC4838	04/01/2022	\$178.00