

Received EPARTMENT OF SAFETY & INSPECTIONS (DSI) ANGIE WIESE, DIRECTOR

MAR 0 6 2024

375 Jackson Street, Suite 220 Saint Paul, MN 55101-1806

City of Saint Paul - DSI

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: 13 Bunk Merzedo
2. Event Name: Fiesta Tridaes Music Sevies
3. Address and physical description of noise source location (Event, Worksite): 175 (escencinal) STROLLI MM) 55101, Path
4. Responsible person: Milissa Silva Title: CED
5. Telephone: (05)-403-3804 E-Mail: Wilssa palbumtonerado
6. Date(s) variance requested: May 3, 24 June 7,21, July 5,19,2100, Hugh
7. Noise source - Time(s) of operation: 5 apm 5 apm
- Time(s) of pre-event sound check: Y a
8. Sound level requested (dBA/Decibels): しゅうーちょみん
9. Mailing address w/zip code: 175 Cesar Chaver St Yau W 55/07
10. Briefly describe the noise source and equipment involved: Socales are faced nathrast
away from sheet residence this iness
11. Describe the steps that will be taken to minimize the noise levels: Mantein Speakorsat
above feeds volume controlled
12. State reason for seeking variance (example - music, announcements, construction, etc.): Vanation of D) of Management of attendees: 100
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
Signature of responsible person:

Cosan Chause St HARTOPIS A Standard Control C (8) 242 (30) (Not drawn to score) SE SE EL BUERT MOTORIO PROPERTO Section Section Trees is - Thing + Parkings

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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: 03/11/2024

Received From: EL BURRITO MERCADO

175 CESAR CHAVEZ ST SAINT PAUL MN 55107

Description:

Invoice Details Invoice Amount Amount Paid

1159100

Noise Variance \$534.00 \$534.00

TOTAL AMOUNT PAID: \$534.00

Paid By:

Payment Type	Check #	Received Date	Amount
Check	17138	03/11/2024	\$178.00
Check	17129	03/11/2024	\$178.00
Check	17130	03/11/2024	\$178.00



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ANGIE WIESE, DIRECTOR

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1. Organization/person seeking variance: <u>Elbum Devicado</u>
2. Event Name: The Musica en Mi Bremo Saturday Music Series
3. Address and physical description of noise source location (Event, Worksite): 175 (oxcer Chawe 28+ STROW). Part U61-221-219)
4. Responsible person: Willissa Silva Title: CED Duner
5. Telephone: 654033804 CUL E-Mail: Milissa & elbemto Marcado. wn
6. Date(s) variance requested: Mary June 8, 223 July 6, 20, August 3, 17, May See
7. Noise source - Time(s) of operation: <u>4:30-8:30</u>
- Time(s) of pre-event sound check: \(\frac{\frac{1}{2}}{2}
8. Sound level requested (dBA/Decibels): 70-20 dBH
9. Mailing address w/zip code: 175 Gescer Chavez St, Straw MN 55107
10. Briefly describe the noise source and equipment involved: 250cakers women for instrument
and/or DT music
11. Describe the steps that will be taken to minimize the noise levels: Speakers curplied faing
northbast away from other business
12. State reason for seeking variance (example - music, announcements, construction, etc.):
Music + cultural events/music
13. Maximum number of attendees: 100
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).
Multiple locations may require more than one application. 15. Submit completed application, site diagram/map, and \$178 fee to:
23. Submit completed application, site diagram/map, and \$270 fee to.
CITY OF SAINT PAUL
DEPARTMENT OF SAFETY AND INSPECTIONS 375 JACKSON
STREET, SUITE 220
SAINT PAUL, MN 55101-1806
Signature of responsible person: Date: 3 5 24

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1. Organization/person seeking variance: 13 Bunto Mercalo	
2. Event Name: Sunday Framiliares Events	
3. Address and physical description of noise source location (Event, Worksite): Pato, ElBemb	
175 Ges Cir Cheuces	
4. Responsible person: 1 AMISCA SINCE TITLE: LED DUNCY	
5. Telephone: US 227 2192 E-Mail: Milissa Belbuntomerado.	مساكما
6. Date(s) variance requested: May 5, 12, June 9, 23, July 14, 28, Aug 11, Sept 15	
7. Noise source - Time(s) of operation: \\ - \\	
- Time(s) of pre-event sound check: $igvee eta igvee eta$	
8. Sound level requested (dBA/Decibels):	
9. Mailing address w/zip code: 175 Gelev Chower St 87 Pacey 55707	
10. Briefly describe the noise source and equipment involved: Speeker, D.), Lie hothership	
11. Describe the steps that will be taken to minimize the noise levels:	
14. A <u>site diagram & map</u> must be attached showing location of noise source(s), streets, stages, tents, etc.	
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SAINT PAUL, MN 55101-1806	
Signature of responsible person:	

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