



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

Public
Hearing
April 6, 2011

Application for Sound Level Variance
City of Saint Paul Noise Ordinance
Chapter 293 of the Saint Paul Legislative Code

1. Organization or person seeking variance: VISIT SAINT PAUL
2. Mailing Address with Zip Code: 175 Kellogg Blvd West Saint Paul MN 55102
3. Responsible person: Adam Johnson
4. Title or position: VP of Marketing
5. Telephone: 651-226-5403
6. Briefly describe the noise source and equipment involved: Outdoor concert by GB Leighton in the Downtowner/Burger Moes parking lot following Championship Hockey Game on April 9.
7. Address or legal description of noise source: 242 West Seventh Street Parking Lot
8. Noise source time of operation: 8-11pm
9. Briefly describe the steps that will be taken to minimize the noise levels: Space is enclosed by brick building walls and artist is open to decibal limits.
10. Briefly state reason for seeking variance: Post game concert during NCAA Men's Frozen Four as entertainment opportunity for fans.
11. Date(s) during which the variance is requested: April 9, 2011

Signature of responsible person: [Signature] Date: 3/9/11

Return completed Application and \$164.00 fee to:
CITY OF SAINT PAUL
DEPARTMENT OF SAFETY AND INSPECTIONS
375 JACKSON STREET, SUITE 220
SAINT PAUL, MN 55101-1806
(651) 266-8989

NOTE: APPLICATION MUST BE RECEIVED NO FEWER THAN 30 (THIRTY) DAYS PRIOR TO THE EVENT DATE



WACHOVIA

90 dot
@
50 feet



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: 03/15/2011

Received From: SAINT PAUL RIVERCENTRE dba: VISIT SAINT PAUL
175 KELLOGG BLVD W STE 502 ST PAUL MN 55102

Description:

Invoice Details

734881

Noise Variance

Invoice Amount

\$164.00

Amount Paid

\$164.00

TOTAL AMOUNT PAID:

\$164.00

Paid By:

| Payment Type | Check # | Received Date | Amount |
|--------------|---------|---------------|----------|
| Check | 39900 | 03/15/2011 | \$164.00 |