

103
\$172



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

RECEIVED

JUN 29 2017

Sound Level Variance Application

City of Saint Paul Noise Ordinance (Chapter 293)

By: City of St Paul DSI

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.

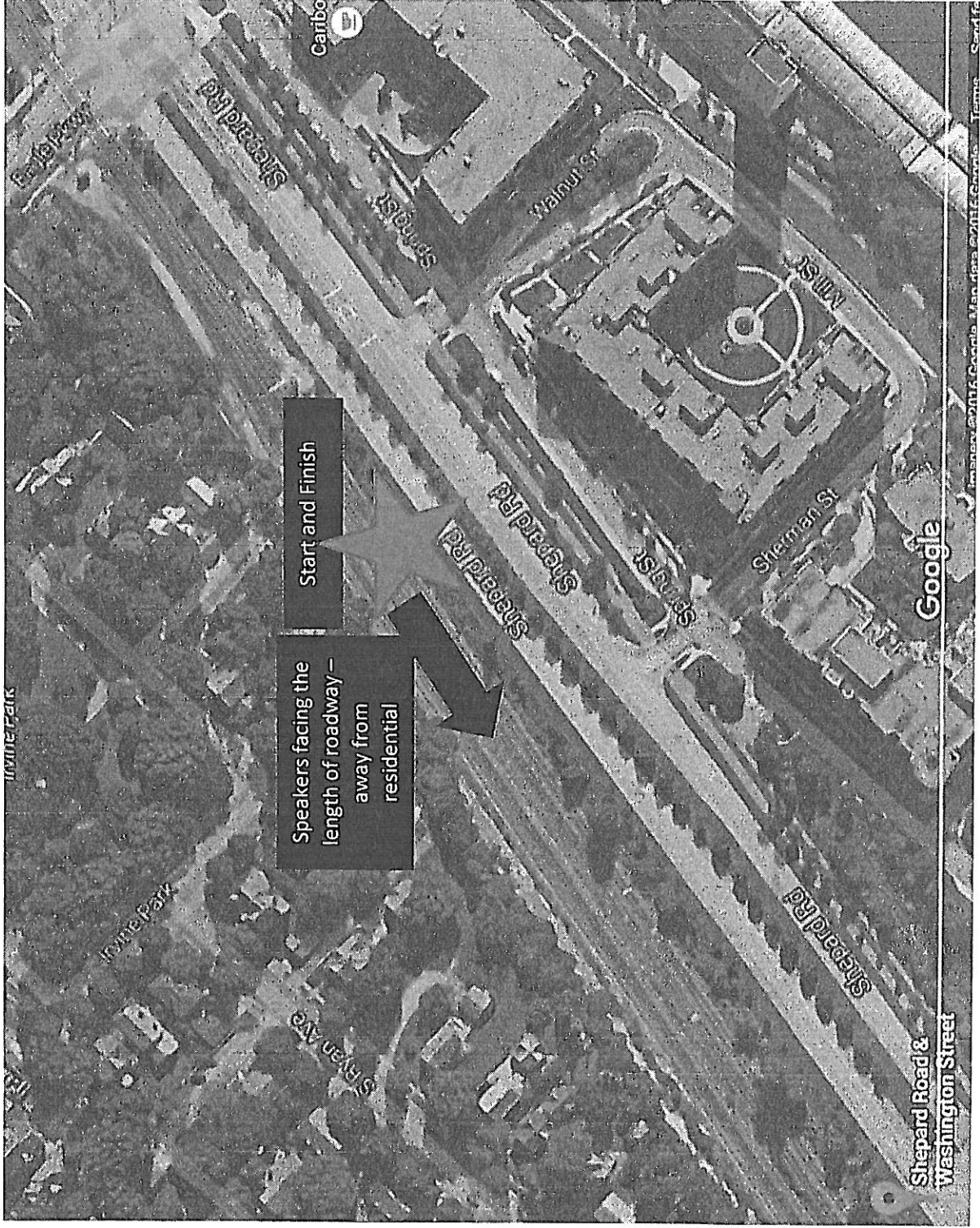
1. Organization/person seeking variance: Team Ortho Foundation
2. Mailing Address w/zip code: PO Box 490, Rosemount, MN 55068
3. Responsible person: John Larson Title: Executive Director
4. Event Name: WOMEN ROCK - Start of Finnish
5. Telephone: (612) 968 3224 E-Mail: marlene@teamortho.us
6. Date(s) during which the variance is requested: August 26, 2017
7. Noise source - Time(s) of operation: 8 a.m. to 1 p.m.
- Time(s) of pre-event sound check: 7:45 a.m.
8. Address or legal description of Noise source: On Shepard Road between Eagle and Washington - amplified sound for start and finish announcements and for vocalist who will sing the National Anthem prior to Start
9. Sound level requested: Amplified sound with speakers angled facing towards the length of Shepard Road -- sound within limits of Section 293.07
10. Describe the noise source and all equipment involved: Speakers, microphone and a vocalist singing the National Anthem
11. Describe the steps that will be taken to minimize the noise levels: Speakers face towards Shepard Road length
Sound will be monitored to remain within limits of Section 293.07
12. State reason for seeking variance: (E.g. music, announcements, construction, etc.)
Start and finish announcements for Women Roack MN a foot race of varied distances celebrating Women with a professional athletic focus.
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 \$169.00 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: _____

John W. Larson

WR 2017 Start – August 26, 2017 – Shepard Road between Eagle and Washington. – Start and Finish Announcements – National Anthem





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: 06/29/2017

Received From: TEAM ORTHO FOUNDATION
PO BOX 490 ROSEMOUNT MN 55068

Description:

Invoice Details

995178

Noise Variance

Invoice Amount

\$172.00

Amount Paid

\$172.00

TOTAL AMOUNT PAID:

\$172.00

Paid By:

Payment Type	Check #	Received Date	Amount
Check	17934	06/29/2017	\$172.00