



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 of the Saint Paul Legislative Code

Note: A public hearing before the Saint Paul City Council is required. Application and fee must be received no fewer than thirty (30) days prior to the public hearing date that is nearest the variance start date. Public hearings are only held on the first and third Wednesday of each month. Variance start dates must be after the public hearing date.

1. Organization/person seeking variance: VISIT SAINT PAUL - ADAM JOHNSON
2. Mailing Address w/zip code: 175 Kellogg Blvd Ste 502 St. Paul MN 55102
3. Responsible person: Adam Johnson
4. Title or position: VP of Marketing
5. Telephone: (651) 226-5403 E-Mail: ajohnson@visitsaintpaul.com
6. Briefly describe the noise source and equipment involved: DJ Truck. Self contained unit with 4 medium sized speakers (speaker info attached) Inside tent - DJ with medium sized amplified music source.
7. Address or legal description of noise source: DJ Truck between Chestnut + Walnut street DJ music from tent on Burger Moe's parking lot.
8. Noise source time of operation: 5pm - 11pm - Steady 5-6:30 + 9-11pm
9. Date(s) during which the variance is requested: January 24, 2015
10. Describe the steps that will be taken to minimize the noise levels: Red Bull and VISIT SAINT PAUL are very cognizant of the neighbors in Irvine Park and area high rises. Red Bull will have event managers on site with decibel reader so guidelines are followed
11. Briefly state reason for seeking variance: The Crashed Ice Village is a new component for fans before and after the event - the variance is so the event can last
12. 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. until 11.
13. 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

Signature of responsible person: _____

Date: 12/12/14

6/18/14



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: 12/12/2014

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

Description:

Invoice Details	Invoice Amount	Amount Paid
916423		
Noise Variance	\$164.00	\$164.00
TOTAL AMOUNT PAID:		\$164.00

Paid By:

Payment Type	Check #	Received Date	Amount
Credit Card		12/12/2014	\$164.00