

OCT 12 2020



CITY OF SAINT PAUL

Business Licensing  
375 Jackson Street, Suite 220  
Saint Paul, Minnesota 55101-1806

Telephone: 651-2668989  
Facsimile: 651-266-9124  
Web: www.stpaul.gov/dsi

**Sound Level Variance Application**  
Legislative Code Chapter 293. - Noise Regulations

Application and \$172 fee payment should be submitted a minimum of sixty (60) days prior to the scheduled event start date. A public notification period is required prior to scheduling the application's Public Hearing before the Saint Paul City Council. Applications received fewer than sixty (60) days prior to the event may not satisfy the ordinance's processing timelines for placement on the Council's agenda.

- 1. Organization/person seeking variance: Anderson Race Management/Jennifer Williams
- 2. Event Name: Chocoholic Frolic 5K/10K/KidsK
- 3. Address and physical description of noise source location (Event, Worksite): Harriet Island  
200 Doctor Justus Ohage Blvd St Paul
- 4. Responsible person: Jennifer Williams Title: Director of Events
- 5. Telephone: 612-475-0000 E-Mail: jennifer@andersonraces.com
- 6. Date(s) variance requested: Sat NOV 7, 2020
- 7. Noise source - Time(s) of operation: 8am-12pm  
- Time(s) of pre-event sound check: 7:45-8am
- 8. Sound level requested (dBA/Decibels): 110
- 9. Mailing address w/zip code: 4047 Camberwell Dr N, Eagan MN 55123
- 10. Briefly describe the noise source and equipment involved: sound system & speakers  
to make event announcements & to play music  
throughout the event
- 11. Describe the steps that will be taken to minimize the noise levels: speakers to face  
away from river & towards pavillion
- 12. State reason for seeking variance (example - music, announcements, construction, etc.): event  
music & announcements

13. 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.

14. Submit completed application, site diagram/map, and \$172.00 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: Jennifer Williams Date: 10-7-2020  
AA-ADA-EEO Employer



= 1 table under a  
10x10 pop up tent  
weighted with tent  
weights for DJ to  
play music and make  
announcements



= Sound direction





# 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](http://www.stpaul.gov/dsi)

Date: 10/13/2020

Received From: ANDERSON RACE MANAGEMENT  
4047 CAMBERWELL DRIVE N EAGAN MN 55123

Description:

Invoice Details

1098846

Noise Variance

Invoice Amount

\$175.00

Amount Paid

\$175.00

**TOTAL AMOUNT PAID:**

**\$175.00**

Paid By:

Payment Type	Check #	Received Date	Amount
Credit Card	V9064	10/13/2020	\$175.00