

Received

DEPARTMENT OF SAFETY AND INSPECTIONS
Ricardo X. Cervantes, Director



CITY OF SAINT PAUL

APR 01 2025

City of Saint Paul - DSI

Business Licensing
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

Legislative Code Chapter 293. - Noise Regulations

Application and \$175 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: Chris Bence
2. Event Name: BT5K Rockin' For Research
3. Address and physical description of noise source location (Event, Worksite):
Como Midway Pinic Pavilion 1199 MidwayParkway St. Paul, MN 55103
4. Responsible person: Leslie Crouch Title: Director, Events
5. Telephone: 312-560-6709 E-Mail: lcrouch@abta.org
6. Date(s) variance requested: Saturday 04 October 2025
7. Noise source - Time(s) of operation: 1:00pm-5:00pm
- Time(s) of pre-event sound check: 12:00 pm
8. Sound level requested (dBA/Decibels): 90dBA
9. Mailing address w/zip code: 8550 W. Bryn Mawr Ave Ste 550 Chicago, IL 60631
10. Briefly describe the noise source and equipment involved: Live music - various local bands
11. Describe the steps that will be taken to minimize the noise levels: Sound tech will be on site to monitor the dBA level
12. State reason for seeking variance (example - music, announcements, construction, etc.):
music and 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 **\$175.00** 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: Christopher J. Bence Date: 01 March 2025

AA-ADA-EEO Employer

February 2020

Main Site Layout - BT5K Twin Cities | Rockin' For Research Como Regional Park | October 4, 2025

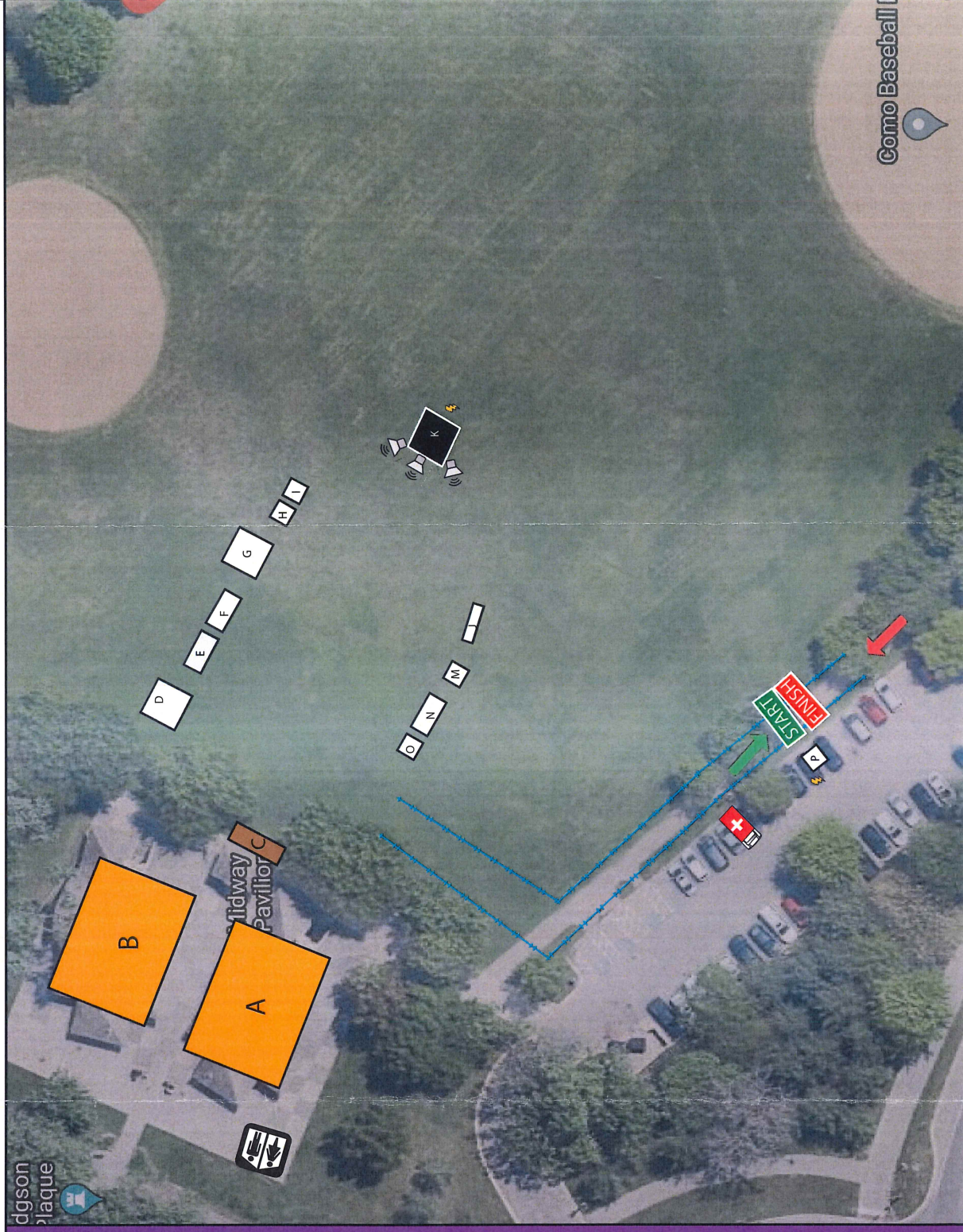


American
Brain Tumor
Association®



Equipment Plan|Key

- A - Registration|Check-In|T-Shirt| Volunteer: Sign Poles, Shore Power
- B - Bronze: Sign Poles, Pre-Existing Picnic Tables, Shore Power
- C - R - Runner Refresh: 6T
- D - Top Team: 20x20, 6T, 36C
- E - Top Team: 10x20, 2T, 12C
- F - Top Team: 10x20, 3T, 18C
- G - Top Team: 20x20, 5T, 30C
- H - Mission: 10x10, Sign Poles, 2T, 2C
- I - Team: 10x10, 2T, 2C
- J - Step & Repeat Banner: 7x20
- K - Main Stage: SL100, Podium, 1T, 2C, 5500W Generator
- M - Sponsor: 10x10, 2T, 2C
- N - Top Team | Sponsor: 10x20, 4T, 16C
- O - Sponsor: 10x10, 2T, 2C
- P - Start/Finish Line: 10x10, 1T, 2C, 3000W Generator





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: 05/13/2025

Received From: AMERICAN BRAIN TUMOR ASSOCIATION
8550 BRYN MAWR AVE STE 550 CHICAGO IL 60631

Description:

Invoice Details

1178581

Noise Variance

Invoice Amount

\$178.00

Amount Paid

\$178.00

TOTAL AMOUNT PAID:

\$178.00

Paid By:

Payment Type	Check #	Received Date	Amount
Credit Card	V8011	05/13/2025	\$3.00
Check	008111	05/13/2025	\$175.00