

CITY OF SAINT PAUL Christopher B. Coleman, Mayor APR 2 6 2018

375 Jackson Street, Suite 220 Saint Paul, Minnesota 55101-1806 Telephone: 651-266-8989 Facsimile: 651-266-9124 Web: www.stpaul.gov/dsi

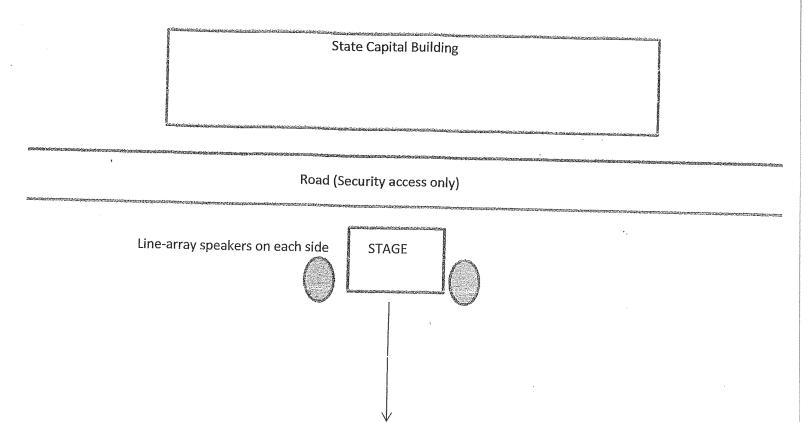
## **Sound Level Variance Application**

City of Saint Paul Noise Ordinance (Chapter 293)

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: India Associa	now of Mr			
2. Mailing Address w/zip_code: DOBox 130158	ST Pall, MN 55113			
3. Responsible person: (and) 5ab Title:	Board Charle			
4. Event Name: India Fest	0 1			
5. Telephone: 952 334 4071 E-Mail: 0	ani. Sagil lamn. orb			
6. Date(s) during which the variance is requested:				
7. Noise source - Time(s) of operation: AM to 10 DM				
- Time(s) of pre-event sound check:				
8. Address or legal description of Noise source: State Capi	tal			
9. Sound level requested: 90db of 100 ft				
10. Briefly describe the noise source and equipment involved:	- AMPS ON STOCK			
By the state of th	•			
11. Descripe the steps that will be taken to minimize the noise levels:	Line Array System, db			
12. State reason for seeking variance (E.g. music, announcements, construction, etc.): Festivity				
13. Attach site diagram showing location of noise source(s), streets, s	tages, tents, etc. (If there will be amplified			
sound, indicate location and direction that all speakers will be facing.)	$\label{eq:Multiple locations} \textbf{Multiple locations may require more than one application}_{\underline{\textbf{s}}}.$			
14. Return completed Application, Site Diagram, and \$172.00 fee to:	CITY OF SAINT PAUL			
the state of the s	DEPARTMENT OF SAFETY AND INSPECTIONS			
	375 JACKSON STREET, SUITE 220			
	SAINT PAUL, MN 55101-1806			
Signature of responsible person:	Date: 4/22/17			
	Date. //O///			

## India Fest August 18<sup>th</sup>, 2018





## **DSI RECEIPT**

CITY OF SAINT PAUL

Department of Safety and Inspections 375 Jackson Street Suite 220 Saint Paul, Minnesola 55101-1806 Phone: (651) 266-8989 Fax: (651) 266-9124 www.stpaul.gov/dsi

Date: 05/04/2018

Received From: INDIA ASSOCIATION OF MINNESOTA

PO BOX 130158 ST PAUL MN 55113

Description:

Invoice Details

Invoice Amount

**Amount Paid** 

1023322

Noise Variance

\$172.00

\$172.00

**TOTAL AMOUNT PAID:** 

\$172.00

## Paid By:

Payment Type	Check#	Received Date	Amount
Check	1042	05/04/2018	\$172.00