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CITY OF SAINT PAUL Christopher B. Coleman, Mayor

MAR 1 6 2015

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)

<u>Note:</u> 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: FINAL Styctch Inc
2. Mailing Address W/zip code: PO BOX 121 Neistrand MN 55053
3. Responsible person: Mark Bongers Title: Owner Parl Director
4. Event Name: (MOLOHOLIC FIOLIC 5K/IOK RUL WALK
5. Telephone: (507) 1549-2322 E-Mail: mbongers & fin Stretch com
6. Date(s) during which the variance is requested: 8 30 Am - 12 Pm @ Writet Island
7. Noise source - Time(s) of operation: November 8th 7015
- Time(s) of pre-event sound check:
8. Address or legal description of Noise source: SWALL ZOO w PA System for
announcements music
9. Sound level requested:
10. Describe the noise source and all equipment involved: 700 W PA System
•
11. Describe the steps that will be taken to minimize the noise levels: Controlled Volume
LAISE DOK, Directional Amplification
12. State reason for seeking variance: (E.g. music, announcements, construction, etc.)
Announcements: Music for start; Finish
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 \$164.00 fee to: CITY OF SAINT PAUL
DEPARTMENT OF SAFETY AND INSPECTIONS 375 JACKSON STREET, SUITE 220
SAINT PAUL, MN 55101-1806
M/aCa/A
Signature of responsible person: Date: 5/10/13



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: 03/17/2015

Received From: FINAL STRETCH INC

PO BOX 121 NERSTREND MN 55053

Description:

Invoice Details

Invoice Amount

Amount Paid

922997

Noise Variance

\$164.00

\$164.00

TOTAL AMOUNT PAID:

\$164.00

Paid By:

Payment Type	Check #	Received Date	Amount
Check	5890	03/17/2015	\$164.00







