



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)

**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: La Shandra D. Exom
- 2. Mailing Address w/zip code: 1900 Suburban 55119 - 1741 Bush Ave
- 3. Responsible person: La Shandra D. Exom Title: 55106
- 4. Event Name: Jam Fest
- 5. Telephone: 313. 205. 7560 E-Mail: missfancypants@gmail.com
- 6. Date(s) during which the variance is requested: July 4-5, 2017
- 7. Noise source - Time(s) of operation: 12pm ~~music~~ <sup>tues</sup> 10pm music will go inside  
- Time(s) of pre-event sound check: 11am
- 8. Address or legal description of Noise source: ~~1900~~ Suburban 55119  
1990 Suburban parking lot
- 9. Sound level requested: 85 decibals @ 50 ft.
- 10. Briefly describe the noise source and equipment involved: Live music, crowd noise

11. Describe the steps that will be taken to minimize the noise levels: After 10pm guest will be inside, and we will keep music levels. A dj will run the sounds for all performances.

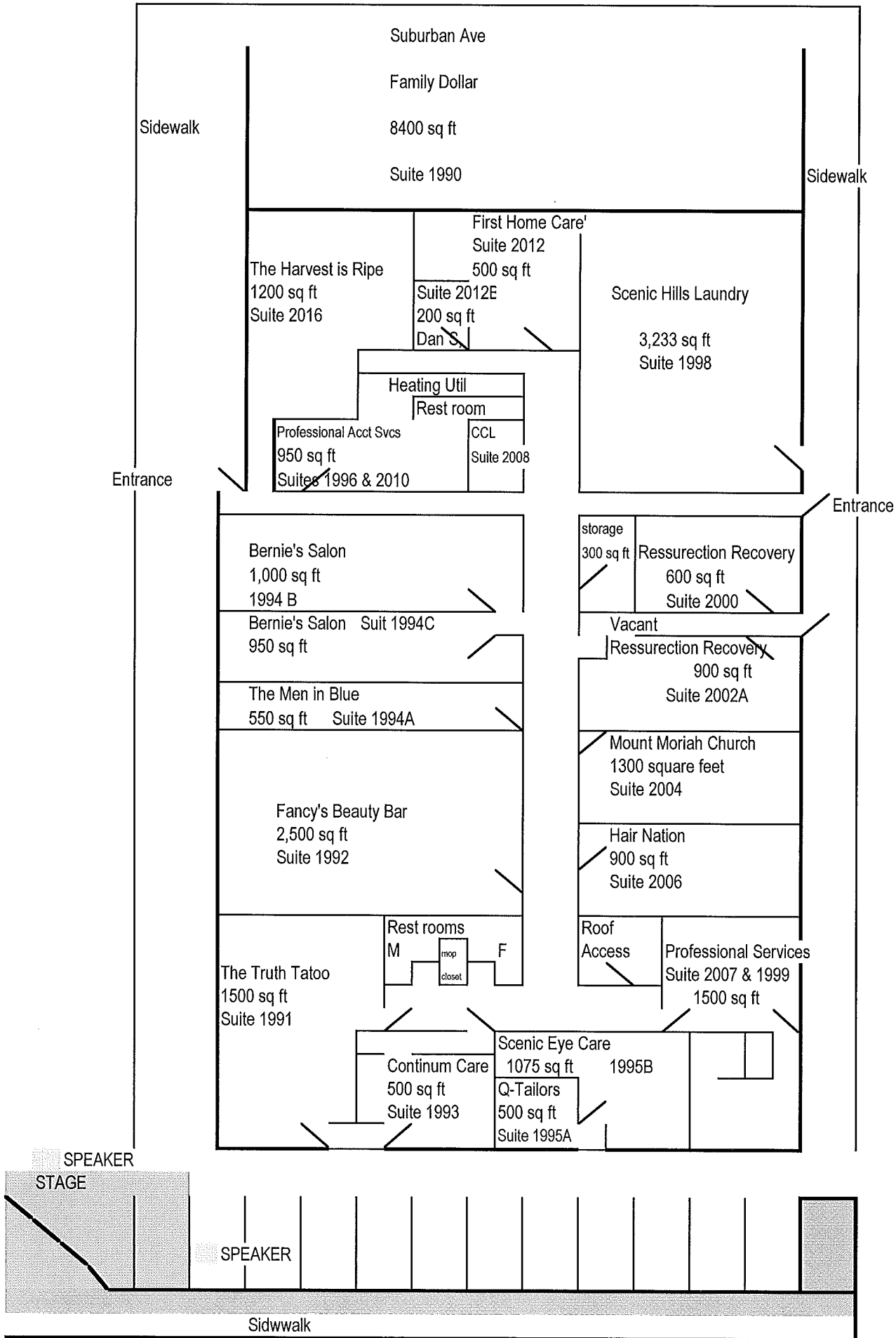
12. State reason for seeking variance (E.g. music, announcements, construction, etc.): Small Free carnival for the community.

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 \$172.00 fee to: CITY OF SAINT PAUL  
DEPARTMENT OF SAFETY AND INSPECTIONS  
375 JACKSON STREET, SUITE 220  
SAINT PAUL, MN 55101-1806  
FAX 651.266.9124

Signature of responsible person: La Shandra D. Exom Date: 5-24-17

# Jam Fest



Burns Ave



# 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: 05/24/2017

Received From: LA SHANDRA EXOM  
1900 SUBURBAN AVE ST PAUL MN 55119

Description:

Invoice Details	Invoice Amount	Amount Paid
992606		
Noise Variance	\$172.00	\$172.00
<b>TOTAL AMOUNT PAID:</b>		<b>\$172.00</b>

Paid By:

Payment Type	Check #	Received Date	Amount
Cash		05/24/2017	\$172.00