

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

Austic :s Henris

## **Application for Sound Level Variance**

City of Saint Paul Noise Ordinance Chapter 293 of the Saint Paul Legislative Code

1. Organization or person seeking variance: Dr. JAMES KROMHOUT	
2. Mailing Address with Zip Code: 18 Kenwood PKY ST Paul 5510	)5
3. Responsible person: Dr JAMES KROMHOUT	
4. Title or position:	
5. Telephone: 612-414 -1033	
6. Briefly describe the noise source and equipment involved: BLUE BRASS acou	ISTIC
Sand -No Drums	
7. Address or legal description of noise source: 18 Kenwood PKY	·
8. Noise source time of operation: $\frac{5t \text{ Pau}}{7 \text{ Pm}} - 11^{36} \text{ PM}$	
8. Noise source time of operation: $7^{pm} - 11^{33} PM$	
9. Briefly describe the steps that will be taken to minimize the noise levels:	
UNDER ATENT	
10. Briefly state reason for seeking variance: Wedding Reception For fa,	nily nember
11. Date(s) during which the variance is requested: 8/4/12	
Signature of responsible person: <u>James P. Komhont</u> Date: <u>5/29/12</u>	<u> </u>
Return completed	
CITY OF SAINT P. SE JOST as morsured 50 feet	ly
DEPARTMENT OI	The same of the sa
375 JACKSON STI	
SAINT PAUL, MN	- Washington Company
(651) 266-8989	
NOTE: APPLICAT	
THAN 30 (THIRT)	5/2010



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: 06/06/2012

Received From: JAMES KROMHOUT

18 KENWOOD PKWY ST PAUL MN 55105

Description:

Invoice Details

**Invoice Amount** 

**Amount Paid** 

815783

Noise Variance

\$164.00

\$164.00

**TOTAL AMOUNT PAID:** 

\$164.00

## Paid By:

Payment Type	Check #	Received Date	Amount
Check	6016	06/06/2012	\$164.00