

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)

<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:Insituform | |
|---|--|
| 2. Mailing Address w/zip code: 1177 Birch Lake Blvd N, White Bear Lake, MN, 55110 | |
| 3. Responsible person: Patrick Hillan Title: _] | Field Engineer |
| 4. Event Name: Ashland -Central Sewer Lining | |
| 5. Telephone:E-Mail:phil | llan@insituform.com |
| 6. Date(s) during which the variance is requested: one 24 hour process | |
| 7. Noise source - Time(s) of operation: 7am-7am 24 hours | |
| - Time(s) of pre-event sound check: | |
| 8. Address or legal description of Noise source: <u>Lining process will occur on Ashland Avenue from Wilder to Moo</u> re | |
| 9. Sound level requested: 70 DBA @ 50 feet after normal working h | ours. |
| 10. Briefly describe the noise source and equipment involved: Running trucks with back up alarms, generators and | |
| hand held power tools. | |
| • | |
| 11. Describe the steps that will be taken to minimize the noise levels: | Site set up will be from 7am to 5 pm. The use |
| of equipment with back up alarms and hand held power tools will be u | used during normal working hours. After hours |
| a truck mounted boiler and critically silenced pump will be used (both | |
| 12. State reason for seeking variance (E.g. music, announcements, construction, etc.): Sewer lining process is 24 | |
| hours of continuous work. | |
| | |
| 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.) | |
| , , , , , , , , , , , , , , , , , , , | , , |
| 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 |
| Signature of responsible person: Patrick Hillan | Date: <u>3-6-18</u> |

