

\$172

DEPARTMENT OF SAFETY AND INSPECTIONS
Ricardo X. Cervantes, Director



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

RECEIVED

JUN 29 2017

Sound Level Variance Application

City of Saint Paul Noise Ordinance (Chapter 293)

By: City of St Paul DSI

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: Team Ortho Foundation

2. Mailing Address w/zip code: PO Box 490, Rosemount, MN 55068

3. Responsible person: John Larson Title: Executive Director

4. Event Name: WOMEN ROCK - Post Race Party

5. Telephone: (612) 968 3224 E-Mail: marlene@teamortho.us

6. Date(s) during which the variance is requested: August 26, 2017

7. Noise source - Time(s) of operation: 8 a.m. to 1 p.m.

- Time(s) of pre-event sound check: 7:45 a.m.

8. Address or legal description of Noise source: Upper Landing Park, Saint Paul, MN 55102 - amplified sound for DJ

9. Sound level requested: Amplified sound with speakers angled facing towards the Mississippi River - sound within limits of Section 293.07

10. Describe the noise source and all equipment involved: DJ with speakers facing towards Mississippi River - sound within limits of Section 293.07

11. Describe the steps that will be taken to minimize the noise levels: Speakers face towards Mississippi River

Sound will be monitored to remain within limits of Section 293.07

12. State reason for seeking variance: (E.g. music, announcements, construction, etc.)

Music to create a celebratory post race party atmosphere

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.

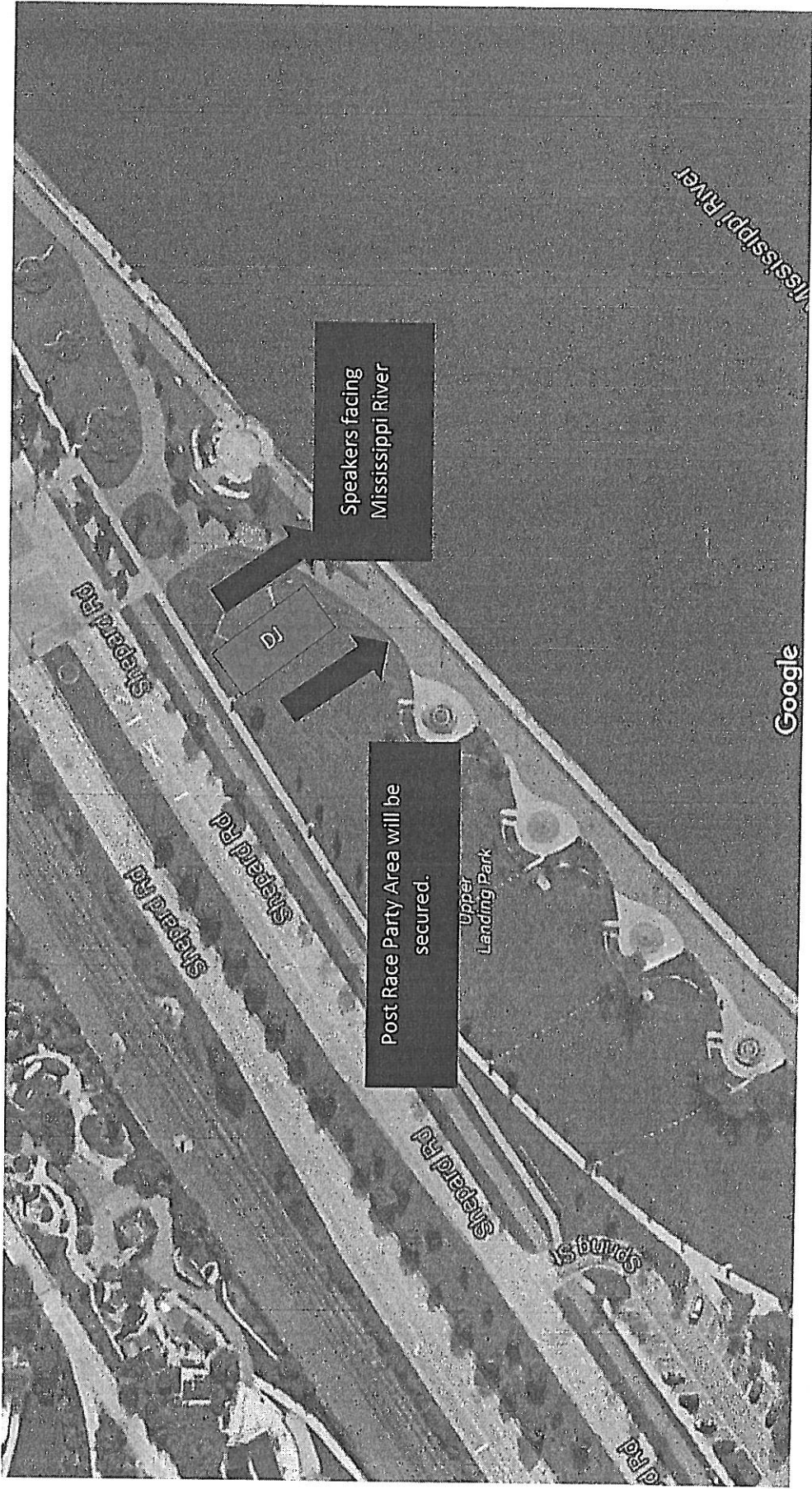
14. Return completed Application, Site Diagram, and \$169.00 fee to: **CITY OF SAINT PAUL**

**DEPARTMENT OF SAFETY AND INSPECTIONS
375 JACKSON STREET, SUITE 220
SAINT PAUL, MN 55101-1806**

Signature of responsible person: *John Larson*

Date: June 27, 2017

Women Rock Post Race Party with DJ – Upper Landing Park, August 26, 2017



Speakers facing Mississippi River

Post Race Party Area will be secured.

Google



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: 06/29/2017

Received From: TEAM ORTHO FOUNDATION
PO BOX 490 ROSEMOUNT MN 55068

Description:

Invoice Details

995179

Noise Variance

Invoice Amount

\$172.00

Amount Paid

\$172.00

TOTAL AMOUNT PAID:

\$172.00

Paid By:

Payment Type	Check #	Received Date	Amount
Check	17935	06/29/2017	\$172.00