



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/dsj

Public Hearing
Sept 7

Application for Sound Level Variance
City of Saint Paul Noise Ordinance
Chapter 293 of the Saint Paul Legislative Code

- Organization or person seeking variance: Greater Frogtown CDC
- Mailing Address with Zip Code: 533 N Dale St St. Paul MN 55103
- Responsible person: Jill Henriksen
- Title or position: Executive Director
- Telephone: 651-789-7487
- Briefly describe the noise source and equipment involved: We are hosting a fundraiser that will involve a live band. The band consists of a singer, drummer & guitar player. We will also be using a speaker system
- Address or legal description of noise source: 533 N Dale Street St Paul MN 55103
- Noise source time of operation: 6pm - 10pm
- Briefly describe the steps that will be taken to minimize the noise levels: there is a fence between our property & the neighbor, there are also a large number of trees & bushes to help contain the sound. Finally the music will stop promptly at 10pm.
- Briefly state reason for seeking variance: We are hosting a fundraising event in our garden
- Date(s) during which the variance is requested: September 8, 2011

Signature of responsible person: Jill Henriksen Date: 7/21/11

Return completed Application to:
CITY OF SAINT PAUL
DEPARTMENT OF SAFETY AND INSPECTIONS
375 JACKSON STREET, SUITE 220
SAINT PAUL, MN 55101-1806
(651) 266-8989

85 dBA
@ 50 feet

**NOTE: APPLICATION MUST BE
THAN 30 (THIRTY) DAYS PRIOR**



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: 08/18/2011

Received From: GREATER FROGTOWN CDC
533 DALE ST N ST PAUL MN 55103

Description:

Invoice Details

755603

Noise Variance

Invoice Amount

\$164.00

Amount Paid

\$164.00

TOTAL AMOUNT PAID:

\$164.00

Paid By:

Payment Type	Check #	Received Date	Amount
Check	6652	08/18/2011	\$164.00