DEPARTMENT OF SAFETY AND INSPECTIONS Ricardo X. Carvantes, Director



CITY OF SAINT PAUL

Business Licensing 375 Jackson Street, Suite 220 Saint Paul, Minnesota 55101-1806

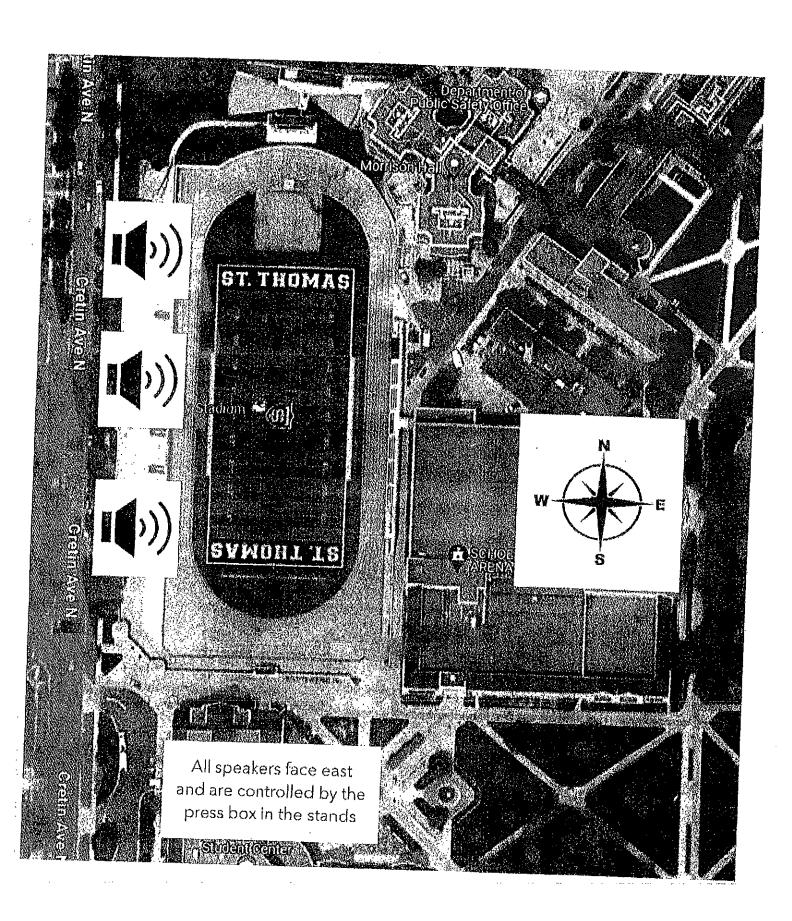
Telephone: 651-266-8989 Facsimile: 651-266-9124 Web: <u>www.sipaul.gov/dsi</u>

Sound Level Variance Application

Legislative Code Chapter 293. - Noise Regulations

Application and \$175 fee payment should be submitted a minimum of sixty (60) days prior to the scheduled event start date. A public notification period is required prior to scheduling the application's Public Hearing before the Saint Paul City Council. Applications received fewer than sixty (60) days prior to the event may not satisfy the ordinance's processing timelines for placement on the Council's agenda.

1. Organization/person seeking va	riance: University of St. 7	homas	
2. Event Name: UST Welcome Day	s Pep Rally		
3. Address and physical description St. Paul, Minnesota 55105	n of noise source location	(Event, Worksite): 211	5 Summit Avenue
4. Responsible person: Travis Horn		Title: UST Assitant	
5. Telephone: <u>651-962-7922</u>	E-M	ail: travis.hornik@stth	omas.edu
6. Date(s) variance requested: 8/27	7/25		
7. Noise source - Time(s) of operati	ion: 6:30 PM - 8:15 PM		
- Time(s) of pre-ever	nt sound check: _ 5:30 PN	-	
8. Sound level requested (dBA/Deci	ibels): 92 dBA at 50 Feet		
9. Mailing address w/zip code: 21			473
10. Briefly describe the noise source making announcements during the	and equipment involved:	Stadium Speakers wi	ll be playing music and
11. Describe the steps that will be tathe area and surrounding neighbor12. State reason for seeking varianceAnnouncements	hood. It will be consister	it with past football ga	mes.
13. A site diagram & map must be at			
there will be amplified sound, indicate			facing).
Multiple locations may requi	• •		
14. Submit completed application, si	te diagram/map, and \$1 2	'5.00 fee to:	
CITY OF SAINT PAUL DEPARTMENT OF SAFETY AND II 375 JACKSON STREET, SUITE 220 SAINT PAUL, MN 55101-1806			
Signature of responsible person:	Travis Hornik	Da [·]	te:5-9-25
	AA ADA EEO Emal	07109	





DSI RECEIPT

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: 06/18/2025

Received From: UNIVERSITY OF ST THOMAS dba: O'SHAUGHNESSY STADIUM

2115 SUMMIT AVE ST PAUL MN 55105

Description:

Invoice Details

Invoice Amount

Amount Paid

1179675

Noise Variance

\$1,246.00

\$1,246.00

TOTAL AMOUNT PAID:

\$1,246.00

Paid By:

Payment Type	Check#	Received Date	Amount
Credit Card	V2693	06/18/2025	\$1,246.00