

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

Public hearing

Application for Sound Level Variance

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

	The state of the s
1. Organization or person seeking variance: HSR Events	
2. Mailing Address with Zip Code: 6545 119 h 21 N	hampin MN 55316
3. Responsible person: Steve Heckler	
4. Title or position: Director	
5. Telephone: 612-227-3108	A
6. Briefly describe the noise source and equipment involved: 1 1 1 1 1 1 1 1 1 1 1 1 1	- day Roots Music Festival 12 Festival) New Event
7. Address or legal description of noise source: Mean Pa	6. K
8. Noise source time of operation: NOSN to 10 PM	
9. Briefly describe the steps that will be taken to minimize the nois	e levels: db mekas lower stage
10. Briefly state reason for seeking variance: A mplifed m	sic testival
11. Date(s) during which the variance is requested: 304	, 2011
Signature of responsible person:	Date: <u>5/13/1)</u>
Return completed Application and \$164.00 fee to: CITY OF SAINT PAUL DEPARTMENT OF SAFETY AND INSPECTIONS 375 JACKSON STREET, SUITE 220	45 ABA Rest
SAINT PAUL, MN 55101-1806	50000
(651) 266-8989	AARR 1
NOTE: APPLICATION MUST BE RECEIVED NO FEW	
THAN 30 (THIRTY) DAYS PRIOR TO THE EVENT DA	
AA-ADA-EEO Employer	KOL Jazz 108.5



DSI RECEIPT

CITY OF SAINT PAUL

Department of Safety and Inspections 375 Jackson Street Suite 220 Saint Paul, Minnesota 55101-1806 Phone: (651) 266-9899 Fax: (651) 266-9124 www.stpaul.gov/dsi

Date: 05/20/2011

Received From: HSR EVENTS

6545 119TH PLACE N CHAMPLIN MN 55316

Description:

Invoice Details Invoice Amount Paid

743964

Noise Variance \$164.00 \$164.00

TOTAL AMOUNT PAID:

\$164.00

Paid By:

Payment Type	Check #	Received Date	Amount
Credit Card		05/20/2011	\$164.00