

ck#  
paid w/ 6223  
\$164.00

DEPARTMENT OF SAFETY AND INSPECTIONS  
Ricardo X. Cervantes, Director



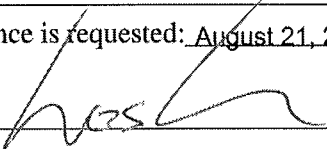
CITY OF SAINT PAUL  
Christopher B. Coleman, Mayor

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

Telephone: 651-266-8989  
Facsimile: 651-266-9124  
Web: www.stpaul.gov/dsi

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

- 1. Organization or person seeking variance: Bedlam Theatre
- 2. Mailing Address with Zip Code: 213 East 4th Street St. Paul, MN 55101
- 3. Responsible person: Lucas Koski
- 4. Title or position: General Manager
- 5. Telephone: 718.316.7491
- 6. Briefly describe the noise source and equipment involved: Music performance. Equipment used: Guitar amps, drums, microphones for vocals
- 7. Address or legal description of noise source: Union Depot 214 4th St B
- 8. Noise source time of operation: 6:30p-10p
- 9. Briefly describe the steps that will be taken to minimize the noise levels: Sound engineer will monitor sound levels and keep them at reasonable levels.
- 10. Briefly state reason for seeking variance: Music performance, in conjunction with Bedlam Theatre's college internship program.
- 11. Date(s) during which the variance is requested: August 21, 2013

Signature of responsible person:  Date: 7/12/13

**Return completed Application and \$164.00 fee to:**  
CITY OF SAINT PAUL  
DEPARTMENT OF SAFETY AND INSPECTIONS  
375 JACKSON STREET, SUITE 220  
SAINT PAUL, MN 55101-1806  
(651) 266-8989

<b>Office Use Only</b>	
Date Rec'd.	_____
Reviewed	_____
Date Public Notice Sent	_____
Referred to Council	_____

**NOTE: APPLICATION MUST BE RECEIVED NO FEWER THAN 30 (THIRTY) DAYS PRIOR TO THE EVENT DATE**



# 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: 07/12/2013

Received From: BEDLAM THEATRE  
213 4TH ST E ST PAUL MN 55101

Description:

Invoice Details	Invoice Amount	Amount Paid
865709		
Noise Variance	\$164.00	\$164.00
<b>TOTAL AMOUNT PAID:</b>		<b>\$164.00</b>

Paid By:

Payment Type	Check #	Received Date	Amount
Check	6223	07/12/2013	\$164.00

Bedlam Theatre Mail 9/22/13  
by  
8/21/13 PH - 8/7/13