

CITY OF SAINT PAUL. Christopher B. Coleman, Mayor

APR 1 0 2014

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

Telephone: 651-266-8989 Facsimile: 651-266-9124 Web; www.sipaul.gov/dxi

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: ブロロー C分の 2. Mailing Address with Zip Code: ②	,	
7. Address or legal description of noise source: <u>UMMN</u> De	get North Plaza wishle	
8. Noise source time of operation: 3 200 FO 10 PM 9. Briefly describe the steps that will be taken to minimize the nois Colory Ph		
10. Briefly state reason for secking variance: Fesh &		
H. Date(s) during which the variance is requested: 五元		
Signature of responsible person	Date: 4/8/14	
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	Office Use Only Date Rec'd Reviewed Date Public Notice Sent Referred to Council	
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NOTE: APPLICATION MUST BE RECEIVED NO FEWER THAN 30 (THIRTY) DAYS PRIOR TO THE EVENT DATE

5/2010



DSI RECEIPT

CITY OF SAINT PAUL

Department of Safety and Inspections 375 Jackson Street Suite 220 Saint Paul, Minnesota 55101-1806 Phone: (651) 266-9989 Fax: (651) 266-9124 www.stpaul.gov/dsi

Date: 04/10/2014

Received From: TWIN CITIES JAZZ FESTIVAL

PO BOX 8162 ST PAUL MN 55108

Description:

Invoice Details

Invoice Amount

Amount Paid

891872

Noise Variance

\$164.00

\$164.00

TOTAL AMOUNT PAID:

\$164.00

Paid By:

Payment Type	!	Check #	Received Date	•	Amount
Check		7554	04/10/2014	i	\$164.00