

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

Sound Level Variance Application

City of Saint Paul Noise Ordinance (Chapter 293)

Note: A public hearing before the Saint Paul City Council is required. Application and fee must be received no fewer than forty five (45) days prior to the public hearing date that is before the requested Variance start date.

1. Organization/person seeking variance: John W. Lavson, Team Ortho Foundation	
2. Mailing Address w/zip code: 2906 N. 2nd St., Minneapolis, MN 55411 3. Responsible person: Tolker 11/1 to come	
3. Responsible person: John W. Lavson Titl	a Executive & Process to Day
4. Event Name: Manster Dash	e: Executive & Race/ Event Directo
5. Telephone: (612)968-3224 E-Mail: teamortho	Al Annail Com
6. Date(s) during which the variance is requested: 10 3 20 5 7. Noise source - Time(s) of operation: 8:45 am - 11 am	
8. Address or legal description of Noise source: Shipurd Ruad & Gannon Ruad (median)	
9. Sound level requested: 80 decibels at 50 feet	
10. Describe the noise source and all equipment involved: Muhila DT w/ Snaukara la conceta	
music for runners when they pass the Shepa	NA & Gannon Ruad on the course
11. Describe the steps that will be taken to minimize the noise levels: [A LINT WITH WALLS ON ALL 3 Sides to ensure HE INTERMED AMECATINE. Speakers well facethe 12. State reason for seeking variance: (E.g. music, announcements, con M. Churre Mtutaunment for	re sound only goes in rever aiming away from
13. <u>Attach site diagram</u> showing location of noise source(s), streets, sta sound, indicate location and direction that all speakers will be facing.) M	iges, tents, etc. (If there will be amplified lultiple locations may require more than one application.
14. Return completed Application, Site Diagram, and \$164.00 fee to:	CITY OF SAINT PAUL
	DEPARTMENT OF SAFETY AND INSPECTIONS 375 JACKSON STREET, SUITE 220 SAINT PAUL, MN 55101-1806
Signature of responsible person:	Date: <u>9-10-15</u>
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