



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

RECEIVED

JAN 28 2016

By: City of St Paul DSI

Sound Level Variance Application

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

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 variance start date.

- 1. Organization/person seeking variance: TEAM ORTHO FOUNDATION
- 2. Mailing Address w/zip code: 2906 N. 2nd Street, Minneapolis, MN, 55411
- 3. Responsible person: Marlene Earll
- 4. Title or position: Race Director
- 5. Telephone: (612) 272-5026 E-Mail: Marlene@teamortho.us
- 6. Briefly describe the noise source and equipment involved:
There will be eight speakers located along Sibley Street.

7. Address or legal description of noise source: Speakers will be located along Sibley st. from Kellogg to Shephard.

8. Noise source time of operation: 8:00AM - 12:30 PM

9. Date(s) during which the variance is requested: MARCH 12, 2016

10. Describe the steps that will be taken to minimize the noise levels:
~~Smaller~~ Multiple speakers will allow ~~to~~ us to have lower volume.

11. Briefly state reason for seeking variance: Announcing the race ^{start} ~~course~~ and finishers.

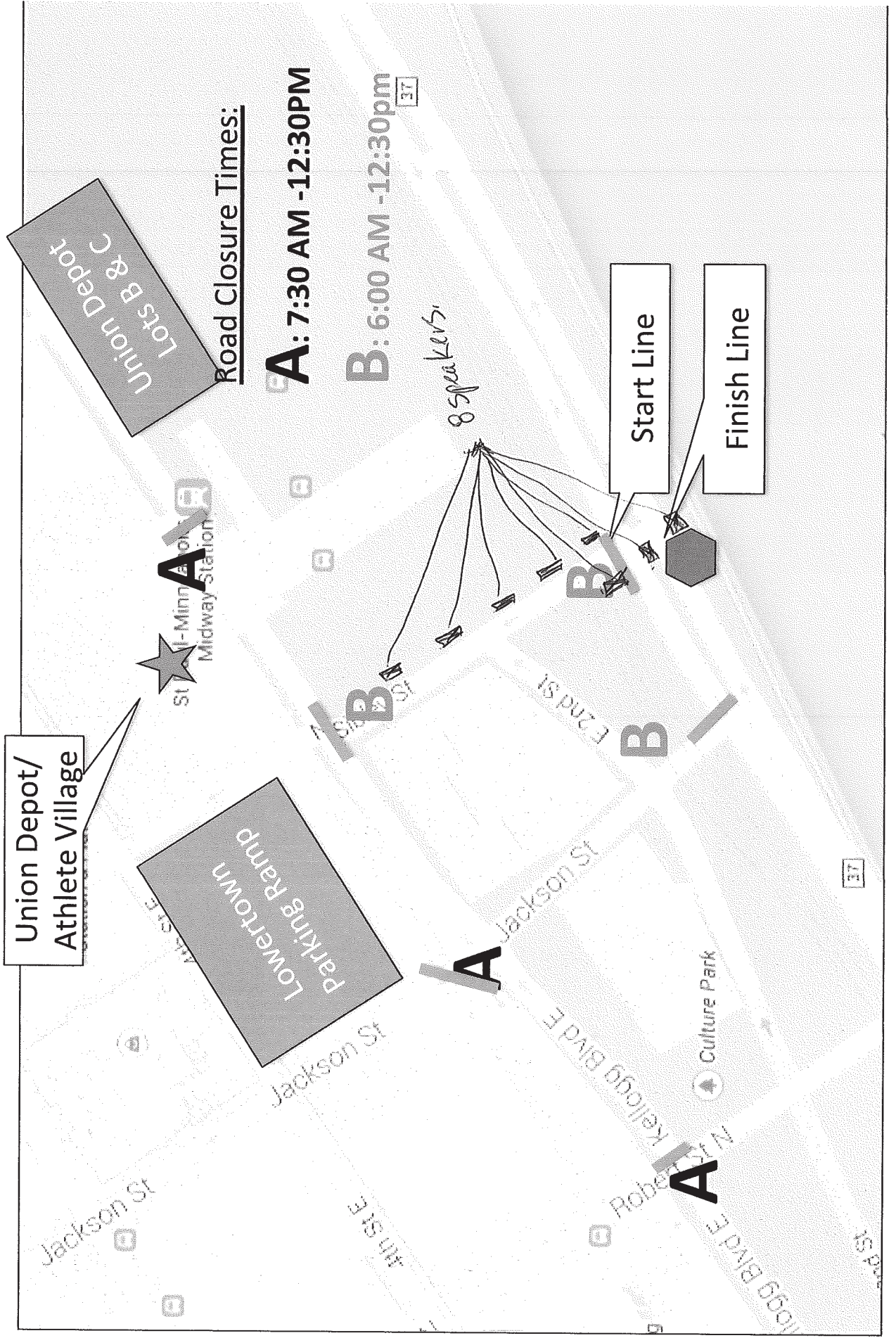
12. Attach site diagram showing location of noise source(s), streets, stages, tents, etc. (If there will be amplified sound, indicate location and direction that all speakers will be facing.) Multiple locations may require more than one application.

13. Return completed Application and \$169.00 fee to:

CITY OF SAINT PAUL
DEPARTMENT OF SAFETY AND INSPECTIONS
375 JACKSON STREET, SUITE 220
SAINT PAUL, MN 55101-1806
(651) 266-8989

Signature of responsible person: Marlene R. Earll Date: JAN. 27, 2016

2016 Get Lucky 21K – St. Paul Key Locations Map





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: 01/28/2016

Received From: TEAM ORTHO FOUNDATION
2906 2ND ST N MINNEAPOLIS MN 55411

Description:

Invoice Details

951008

Noise Variance

Invoice Amount

\$169.00

Amount Paid

\$169.00

TOTAL AMOUNT PAID:

\$169.00

Paid By:

Payment Type	Check #	Received Date	Amount
Check	14305	01/28/2016	\$169.00