

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: Team Ortho Foundation			
. Mailing Address w/zip code: PO Box 490, Rosemount, MN 55068			
3. Responsible person: Marlene Faril Title: Director			
4. Event Name: Get Lucky			
5. Telephone: (612 ) 272-5026 E-Mail: marlene@teamortho.us			
6. Date(s) during which the variance is requested: March 11, 2017			
7. Noise source - Time(s) of operation: 8 a.m. to 1:30 p.m.			
- Time(s) of pre-event sound check: 7:45 a.m.			
8. Address or legal description of Noise source: Ontario and Shepard - DJ with turntable and speakers			
9. Sound level requested: Amplified sound with speakers angled facing towards River sound within limits of Section			
10. Describe the noise source and all equipment involved: DJ with amplifier to speakers for Racer announcements			
and music			
11. Describe the steps that will be taken to minimize the noise levels: Speakers face towards River			
Sound will be monitored to remain within limits of Section 293,07			
12. State reason for seeking variance: (E.g. music, announcements, construction, etc.)			
Music to create celebratory race atmosphere and informational announcements for racers.			
13. 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.			
14. Return completed Application, Site Diagram, and \$169.00 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: Marlene Earl Date: 1-10-17			

