

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)

<u>Note:</u> 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: Bureen M.	oe'5
2. Mailing Address w/zip code: 242 w. Th	5t. St. Paul MN. 55/02
3. Responsible person: Mor Shar T	itle: OWNEV,
4. Event Name: St. Patrick's day	= 20/8 16 and 17
5. Telephone: (651) 402-9244 E-Mail: MOC (a)	Downtowner wood Fire . Com
6. Date(s) during which the variance is requested: March	16,17 2018
7. Noise source - Time(s) of operation:	12 00 AM
- Time(s) of pre-event sound check:	n-360 pm
	2. TIM st. Tent Party
9. Sound level requested: 100 - 95 50 F	at source.
10. Describe the noise source and all equipment involved:	67a8-
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11. Describe the steps that will be taken to minimize the noise levels $(ReCm)^2 I$.	s: Goby referrant
12. State reason for seeking variance: (E.g. music, announcements,	construction, etc.)
Plans music, Tent and Black	
13. Attach site diagram showing location of noise source(s), streets, sound, indicate location and direction that all speakers will be facing	
14. Return completed Application, Site Diagram, and \$164.00 fee to	c: CITY OF SAINT PAUL
\$ 172/59	DEPARTMENT OF SAFETY AND INSPECTIONS 375 JACKSON STREET, SUITE 220 SAINT PAUL, MN 55101-1806
Signature of responsible person:	Date: 1/8/18

4172



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: 01/08/2018

Received From: BURGER MOE'S INC

242 7TH ST W ST PAUL MN 55102

Description:

Invoice Details

Invoice Amount

Amount Paid

1014363

Noise Variance

\$172.00

\$172.00

TOTAL AMOUNT PAID:

\$172.00

Paid By:

Payment Type	Check #	Received Date	Amount
Check	30853	01/08/2018	\$169.00
Credit Card	VISA- 3875	01/08/2018	\$3.00