RECEIVED IN D.S.I.

DEPARTMENT OF SAFETY AND INSPECTIONS Ricardo X. Cervantes, Director





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

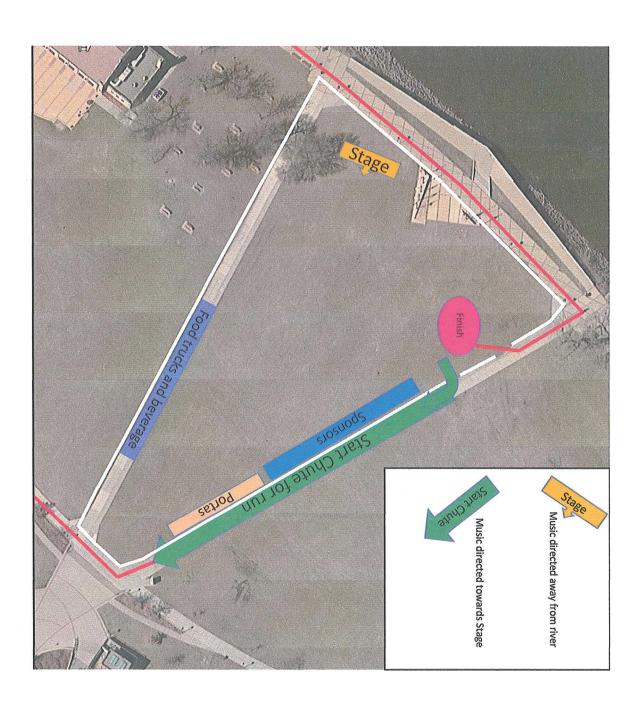
Telephone: 651-266-8989 Facsimile: 651-266-9124 Web: www.stpaul.gov/dsi

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:TMT Productions LLC			
2.	Mailing Address w/zip code: 7982 Dempsey Way Inver Grove Heights MN 55076			
3.	Responsible person:Dion Chapman Title: Director			
4.	Event Name: Night Nation Run			
5.	Telephone: 507-990-1216 E-Mail: dion@nightnationrun.com			
6.	te(s) during which the variance is requested: 07/14/2018			
7.	Noise source - Time(s) of operation: 5:30 pm - 11:00 pm			
	- Time(s) of pre-event sound check: 2:00 pm			
8.	Address or legal description of Noise source: Harriet Island Park 200 Dr. Justus Ohage Blvd St. Paul			
9.	Sound level requested: 120dba (Main Stage) 100 dba (Start line)			
10	Briefly describe the noise source and equipment involved:concert line array with concert lows			
-				
11	Describe the steps that will be taken to minimize the noise levels: We will be in constant contact with			
	Harriet Island staff to make sound adjustments as necessary			
12	State reason for seeking variance (E.g. music, announcements, construction, etc.): Run run with live DJ music			
13	. <u>Attach site diagram</u> showing location of noise source(s), streets, stages, tents, etc. (If there will be amplified			
	und, 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 \$172.00 fee to: CITY OF SAINT PAUL			
	DEPARTMENT OF SAFETY AND INSPECTIONS			
	375 JACKSON STREET, SUITE 220 SAINT PAUL, MN 55101-1806			
	SAIM FACE, ININ 33101-1000			
Sig	gnature of responsible person: Dion Chapman Date: 05/24/2018			





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: 05/30/2018

Received From: TMT PRODUCTIONS LLC

7982 DEMPSEY WAY INVER GROVE HEIGHTS MN 55076

Description:

Invoice Details

Invoice Amount

Amount Paid

1024732

Noise Variance

\$172.00

\$172.00

TOTAL AMOUNT PAID:

\$172.00

Paid By:

Check #	Received Date	Amount
3593	05/30/2018	\$172.00
		1.000.1011 24.00