

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

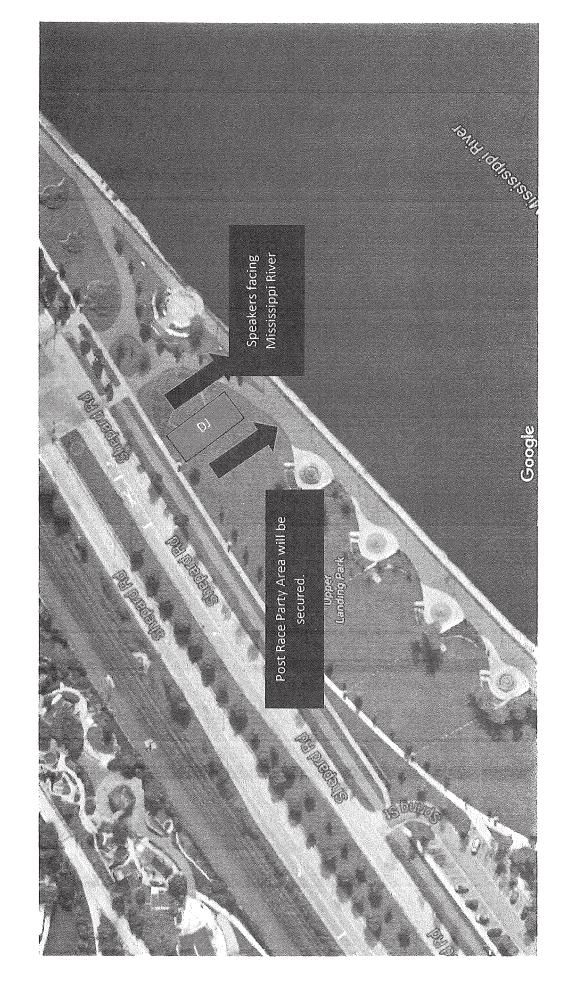
City of Saint Paul Noise Ordinance (Chapter 293)

<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.

	. Organization/person seeking variance: Team Ortho Foundation				
2.	. Mailing Address w/zip code: 15712 Forest Circle, Burnsville, MN 55306				
	Responsible person: John Larson Title: Executive Director				
4.	Event Name: 2018 Women Rock MN				
5.	Telephone: 612-968-3224 E-Mail: marlene.earll@outlook.com				
6.	Date(s) during which the variance is requested: <u>August 25, 2018</u>				
7. Noise source - Time(s) of operation: 7:30 a.m. to 1:30 p.m.					
	- Time(s) of pre-event sound check: 7:15 a.m.				
8.	Address or legal description of Noise source: Upper Landing Park, St. Paul, MN				
9. 10	Sound level requested: Amplified sound with speakers facing towards Mississippi River and away from residential business sound within limits of 293.07 Briefly describe the noise source and equipment involved: Speakers and microphone used by DJ				
11	. Describe the steps that will be taken to minimize the noise levels: Abiding within code and placing speakers towards Mississippi River				
12	. State reason for seeking variance (E.g. music, announcements, construction, etc.): Post Race Party music for celebratory ambience				
13	Attach site diagram showing location of noise source(s), streets, stages, tents, etc. (If there will be amplified				
so	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				
	(A) AM				
Sig	gnature of responsible person: 7 m/m Date: 4mm, 20/8				

April, 2017

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Women Rock Post Race Party with DJ - Upper Landing Park, August 25, 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: 06/27/2018

Received From: TEAM ORTHO FOUNDATION

PO BOX 490 ROSEMOUNT MN 55068

Description:

Invoice Details

Invoice Amount

Amount Paid

1026794

Noise Variance

\$344.00

\$344.00

TOTAL AMOUNT PAID:

\$344.00

Paid By:

Payment Type	Check #	Received Date	Amount
Check	7578	06/27/2018	\$344.00