

RECEIVED IN D.S.I.

DEPARTMENT OF SAFETY AND INSPECTIONS
Ricardo X. Cervantes, Director



CITY OF SAINT PAUL
Christopher B. Coleman, Mayor

JUL 05 2018

Web: www.stpaul.gov/dsi

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

Telephone: 651-266-8989
Facsimile: 651-266-9124

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: Tawfiq Islamic Center
2. Mailing Address w/zip code: 2400 Minnehaha Ave, Minneapolis MN 55404
3. Responsible Person: Arif Bakar Title: Executive Director
4. Event name: Eid-al-Fitr Muslims Festival
5. Telephone: (763) 568-4659 E-Mail: arifbakar83@gmail.com
6. Date(s) during which the variance is requested: August 20th or 21st, 2018
7. Noise source - Time(s) of operation: 6:30 am - 10:30 a m
- Time(s) of pre-event sound check: 6:30 am - 7:00 am
8. Address or legal description of Noise source: Oxford Community Center
270 N Lexington Pkwy, St Paul, MN 55104
9. Sound level requested: 80 dB
10. Describe the noise source and all equipment involved: PA and speaker

11. Describe the steps that will be taken to minimize the noise Face the speaker towards the field and lower the volume.

12. State reason for seeking variance: (E.g. music, announcements, construction, etc.)

We will use the PA loudspeaker system for prayer and to address large audience to be assembled for the occasion in the stadium or sport playground.

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 \$172.00 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:

Date: 06/30/2018

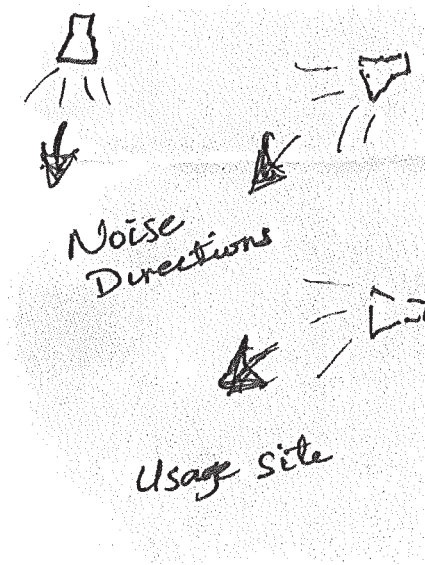


Concordia Ave

Concordi

Lexington Pkwy N

NIS P0010



Carroll Av

NIS P0010

Lexington Pkwy N



Oxford Community Center

Iglehart A



Jimmy Lee Recreation Center

NIS P0010

Iglehart Ave



Marshall Ave

Marshall



C



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: 07/12/2018

Received From: TAWFIQ ISLAMIC CENTER
2400 MINNEHAHA AVE MINNEAPOLIS MN 55404

Description:

Invoice Details	Invoice Amount	Amount Paid
1027985		
Noise Variance	\$172.00	\$172.00
TOTAL AMOUNT PAID:		\$172.00

Paid By:

Payment Type	Check #	Received Date	Amount
Check	1554	07/12/2018	\$172.00