DEPARTMENT OF SAFETY AND INSPECTIONS Ricardo X. Cervantes, Director

AUG 0 8 2018



CITY OF SAINT PAUL Christopher B. Coleman, Mayor

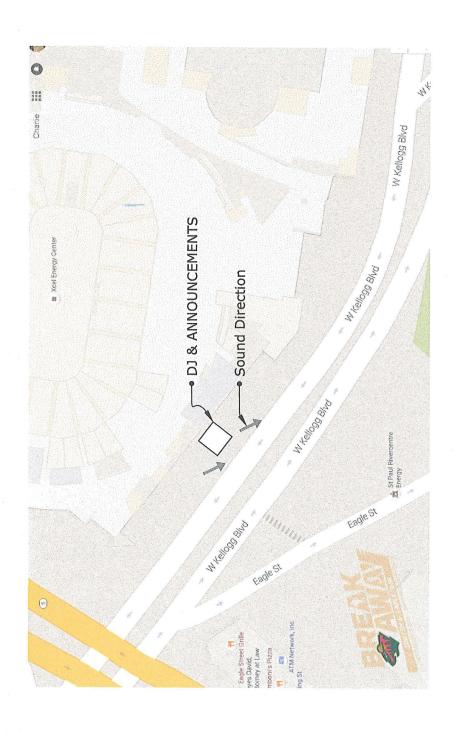
375 Jackson Street, Suite 220 Saint Paul, Minnesota 55101-1806 Telephone: 651-266-8989 Facsimile: 651-266-9124 Web: www.stpaul.gov/dsi

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	

1. Organization/person seeking variance: FLANNEL ATHLETICS
2. Mailing Address w/zip code: 14619 SYMTER AVE, SAVAGE, MN 55378
3. Responsible person: CHARLIE WASLEY Title: OWNER
1 Event Name: MN WID BREAK AWAY RUN
5. Telephone: 612-599-7187 E-Mail: CWASLEY @ FLANNELATHLETICS. (OM
6. Date(s) during which the variance is requested: 9/15/18
7. Noise source - Time(s) of operation: 7:00 Am - 10:00 Am
- Time(s) of pre-event sound check: 7:00 AM
8. Address or legal description of Noise source: 199 W KELLOGG BLUD; SAINT PAUL, MN SSIUZ
EXCEL ENERGY (ENTER
9. Sound level requested: 90 DECIBALS
10. Briefly describe the noise source and equipment involved: SCO WATT SOUND SYSTEM - DT
PLAYING MUSEC AND ANNOUNCER MAKING PA ANNOUNCEMENTS
PLAY IN 8 MINIST MIN O MINISTER MINISTE
11. Describe the steps that will be taken to minimize the noise levels: MUSTC + PA AWNOUNCEMENTS
WILL BE KEPT AT A LEVEL JUST LOUD ENOUGH SO PARTICEPANTS CAN HEAR
INSTRUCTIONS NEAR START/FINISH LINE
12. State reason for seeking variance (E.g. music, announcements, construction, etc.):
MUSIC + PA ANNUNCEMENTS
10 WAY - VINOCHILLOYS
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: 7/30/18





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: 08/10/2018

Received From: FLANNEL ATHLETICS

14619 SUMTER AVE SAVAGE MN 55378

Description:

Invoice Details

1030077

Noise Variance

Invoice Amount

Amount Paid

\$172.00

\$172.00

TOTAL AMOUNT PAID:

\$172.00

Paid By:

Payment Type	Check #	Received Date	Amount
Check	1119	08/10/2018	\$172.00