

# 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: 02/20/2019

Received From: TOM SCHOENBERGER dba: HERBIE'S ON THE PARK 317 WASHINGTON ST ST PAUL MN 55102

#### Description:

Invoice Details	Invoice Amount	Amount Paid
1048802		
Noise Variance	\$172.00	\$172.00

### TOTAL AMOUNT PAID:

\$172.00

#### Paid By:

Payment Type	Check #	Received Date	Amount
Credit Card	MC 6762	02/20/2019	\$172.00

DS1 375 JACKSON ST STE 220 SAINT PAUL, MN. 55101-1806 651-266-9111

### Phone Order

xxxxxxxxxx6762 MASTERCARD	Entry Method: Manual
Amount:\$ Tax: \$	172.00 0.00
Total: \$	172.00
02/20/19 Inv #: 000000005 Apprvd: Online AVS Code: CVV2 Code: MATCH M	12:55:37 Appr Code: 011875

Customer Copy THANK YOU!

CITY OF SAINT PAUL

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

Telephone: 651-2668989 Facsimile: 651-266-9124 Web: www.stpaul.gov/dsi

## Sound Level Variance Application

Legislative Code Chapter 293. - Noise Regulations

Application and \$172 fee payment should be submitted a minimum of sixty (60) days prior to the scheduled event start date. A public notification period is required prior to scheduling the application's Public Hearing before the Saint Paul City Council. Applications received fewer than sixty (60) days prior to the event may not satisfy the ordinance's processing timelines for placement on the Council's agenda.

- 1. Organization/person seeking variance: \_\_\_\_\_ Herbie's on the Park
- 2. Event Name: St Patrick's Day Block Party
- 3. Address and physical description of noise source location (Event, Worksite): <u>317 Washington Street</u> Event site with tent
- 4. Responsible person: Tom Schoenberger \_\_\_\_\_\_ Title: General Manager
- 5. Telephone: 6561-726-1701 E-Mail: tschoenberger@levyrestaurants.com
- 6. Date(s) variance requested: \_\_\_\_\_\_3.16.19
- 7. Noise source Time(s) of operation: 10am 7pm
  - Time(s) of pre-event sound check: \_\_\_\_10am
- 8. Sound level requested (dBA/Decibels): Uncertain
- 9. Mailing address w/zip code: 317 Washington Street St Paul, MN 55102
- 10. Briefly describe the noise source and equipment involved: \_ Speakers on stands with a DJ Set up

**11.** Describe the steps that will be taken to minimize the noise levels: the speakers will be inside of the tent we plan on using and we will keep the volume at a level so people can still have conversation.

12. State reason for seeking variance (example - music, announcements, construction, etc.): \_\_\_\_\_ One-time variance for music from a DJ for a block party

**13.** A <u>site diagram & map</u> must be attached 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. Submit completed application, site diagram/map, 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:

AA-ADA-EEO Employe

Date:

