

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: 07/16/2019

Received From: UNIVERSITY OF ST THOMAS

2115 SUMMIT AVE ST PAUL MN 55105

Description:

Invoice Details

Invoice Amount

Amount Paid

1058967

Noise Variance

\$172.00

\$172.00

TOTAL AMOUNT PAID:

\$172.00

Paid By:

Payment Type	Check #	Received Date	Amount
Check	10375850	07/16/2019	\$172.00

DEPARTMENT OF SAFETY AND INSPECTIONS Ricardo X. Cervantes, Director



Signature of responsible person:

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

B 172-2L



Sound Level Variance Application

Legislative Code Chapter 293. - Noise Regulations

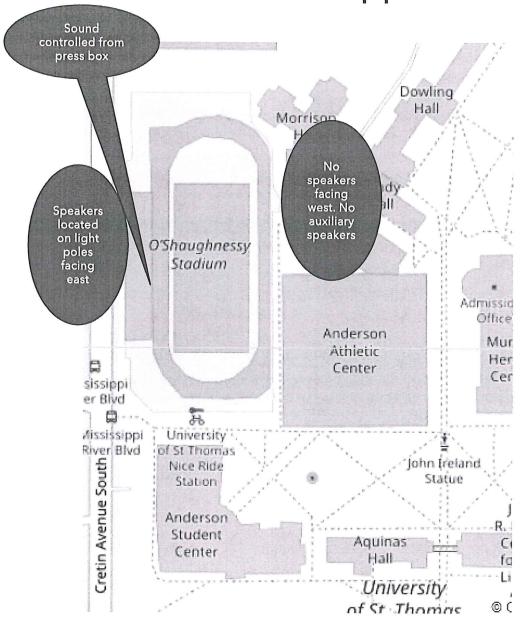
JUL 16 2019

Date: July 2, 2019

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: University of St. Thomas, William R. Carter, III, Public Safety				
2.	Event Name: Welcome Days				
<i>3</i> .	Address and physical description of noise source location (Event, Worksite):				
_A	ddress: 2115 Summit Ave. St. Paul, MN_Source: O'Shaughnessy Stadium, Location: Cretin Ave. N at				
Mi	ssissippi River Blvd.				
4.	Responsible person: William R. Carter, III				
	Telephone: 651-962-5107 (office) E-Mail: wrcarter@sttthomas.edu				
6.	Date(s) variance requested: Friday August 30, 2019				
	Noise source - Time(s) of operation: 7:00 p.m. to 9:00 p.m.				
	- Time(s) of pre-event sound check: 4:00 p.m. to 5:30 p.m.				
8.	Sound level requested (dBA/Decibels): 95 dB at 50 ft.				
9.	Mailing address w/zip code: MHC 106 2115 Summit Ave. St. Paul, MN 55105				
10.	The course will be from the stadium public address				
and	d 1,300 or so participants in the ice breaker activities.				
a s 	Describe the steps that will be taken to minimize the noise levels: The sound system control system and ound meter will be used along with in-person monitoring in the stadium and neighborhood. State reason for seeking variance (example - music, announcements, construction, etc.): sic, announcements, and participants				
	A <u>site diagram & map</u> must be attached showing location of noise source(s), streets, stages, tents, etc. (If there 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				
Sigi	nature of responsible person: Date: July 2, 2019				

Layout Map for Sound Variance Application









July 2, 2019

Ricardo X. Cervantes, Director Department of Safety and Inspections City of St. Paul Suite 200 375 Jackson Street St. Paul, MN 55101

Dear Director Cervantes,

I am submitting the enclosed sound variance application on behalf of the University of St. Thomas. This variance is being sought in relation to university's new student Welcome Days. Also, I have included a diagram, and will be paying the required fee with the enclosed check #10375850.

The sound will be closely monitored by the university's IRT Event Services and Public Safety. St. Thomas will send e-mails and use social media to notify neighbors of these events and times.

If you have any questions or require further information, please contact me. I will serve as your point of contact for this application

Cordially,

William R. Carter, Ill Ed. D.

W. De D Cate III

Special Projects Manager, Department of Public Safety

wrcarter@stthomas.edu, 651-962-5107