

CITY OF SAINT PAUL

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

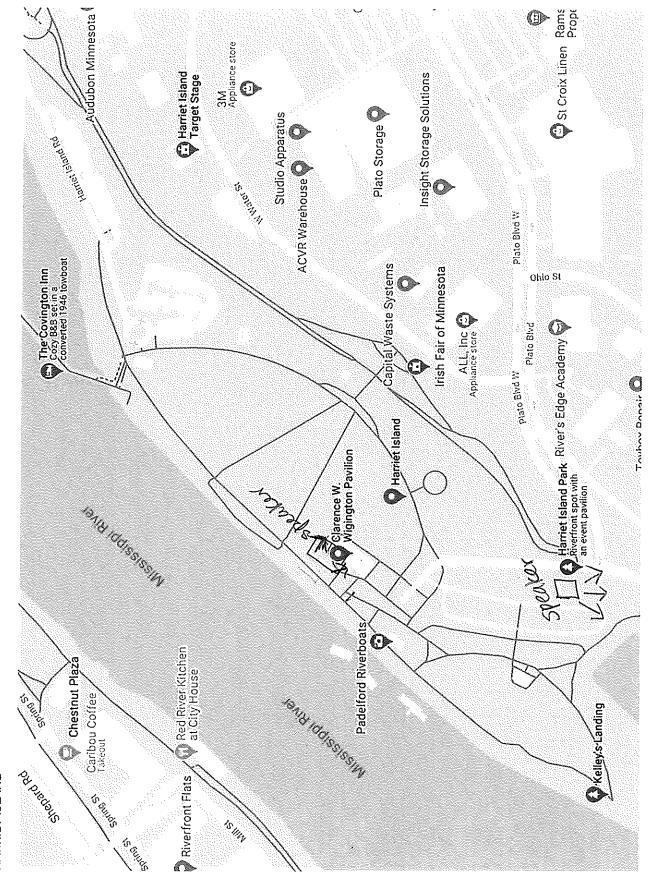
Sound Level Variance Application

Legislative Code Chapter 293. - Noise Regulations

Application and \$175 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: Mountan Series LC. / Marlene Earl
2. Event Name: Marth Dush
3. Address and physical description of noise source location (Event, Worksite): 200 Justus Chage
Sunt Paul, MV-By Wiggington and intersect of Drawtis Chay &
4. Responsible person: Marlene Earl Title: ast Race derector Plato Blod W
5. Telephone: 612-272-5026 E-Mail: Marlene, earl @ outlook.com
6. Date(s) variance requested: October 31, 2020
7. Noise source - Time(s) of operation: 8am - 1pm
- Time(s) of pre-event sound check: <u>7:45am</u>
8. Sound level requested (dBA/Decibels): 85 decibels
9. Mailing address w/zip code: 15712 Forest Circle, Burnsville, MN 55306
10. Briefly describe the noise source and equipment involved: (Implified speaks sound for
announaments and music
11. Describe the steps that will be taken to minimize the noise levels IVL Lest Abrund Levels and Oured Sound way from pusidential as much as possible 12. State reason for seeking variance (example - music, announcements, construction, etc.): Whousements and music
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 \$175.00 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: Malene Earl Date: 8/25/20

AA-ADA-EEO Employer





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: 08/27/2020

Received From: MARLENE EARLL dba: MONSTER SERIES LLC

15712 FOREST CIRCL BURNSVILLE MN 55306

Description:

Invoice Details

Invoice Amount

Amount Paid

1090214

Noise Variance

\$350.00

\$350.00

TOTAL AMOUNT PAID:

\$350.00

Paid By:

Payment Type	Check #	Received Date	Amount
Credit Card	V3199	08/27/2020	\$350.00