

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 should be submitted a minimum of sixty (60) days prior to the event date to allow ample time for required public notification period and scheduling of a Council public hearing. Applications submitted within sixty (60) days of the event date may not satisfy the processing timeline requirements.

Anderson Back to the
1. Organization/person seeking variance:
2. Event Name: Winter Carnival 5K (Scurian)
3. Address and physical description of noise source location (Event, Worksite): Lake. Phalen— 1615 Phalen Drive
4. Responsible person: Many Anderson Title: PV45ident
5. Telephone: 612-202-26/10 E-Mail: Man @ anderson races. Com
6. Date(s) variance requested: Jan 30, 2021
7. Noise source - Time(s) of operation: 8 am - 2pm
- Time(s) of pre-event sound check: 1145 am
8. Sound level requested (dBA/Decibels): 11 ()
9. Mailing address w/zip code: 4047 Camber well DV N, Eagan MV 55183
10. Briefly describe the noise source and equipment involved: D.J. to provide music &
11. Describe the steps that will be taken to minimize the noise levels: 5tart @ 8am,
point speakers away from lake
12. State reason for seeking variance (example - music, announcements) construction, etc.):
13. Maximum number of attendees: <u>a50</u> cach wave, 3 waves 14. Describe steps that will be taken to prevent COVID-19 virus spread: <u>Follow Our Cavidplan</u> , MASKS, DDC 5
15. 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). Wultiple
locations may require more than one application.
16. 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
I understand that any social gathering associated with this variance must be managed in full compliance with all applicable Governor Walz COVID-19 orders relating to distancing, masks and attendance limits.
Signature of responsible person: January William Date:
AA-ADA-EEO Employer

Securian Winter Carnival 5K Saturday, Jan 30, 2021 8 am—2 pm



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: 11/13/2020

Received From: MARY ANDERSON dba: ANDERSON RACE MANAGEMENT

4047 CAMBERWELL DRIVE N EAGAN MN 55123

Description:

Amount Paid Invoice Amount Invoice Details

1100352

\$175.00 \$175.00 Noise Variance

\$175.00 **TOTAL AMOUNT PAID:**

Paid By:

Payment Type	Check #	Received Date	Amount
Credit Card	V9831	11/13/2020	\$175.00