

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.

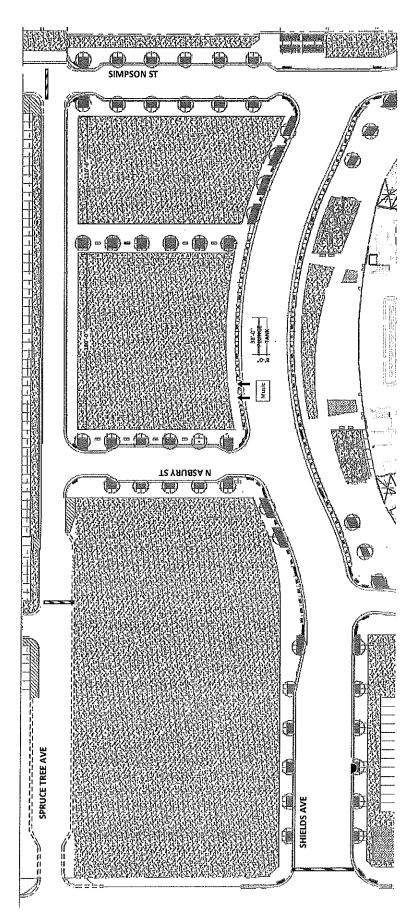
1. Organization/person seeking variance: Allianz F	ield	
2. Event Name: Surly & Special Olympics: Polar Plunge	at Allianz Field	
3. Address and physical description of noise sour	ce location (Event, Worksite):
400 Snelling Ave. North - St. Paul, MN 55104 Gre	at Lawn	
4. Responsible person: Zacharia Litzelswope	Title: Director, Eve	nts & Guest Experience
5. Telephone: 612-928-6406		
6. Date(s) variance requested: Saturday, October 30), 2021	
7. Noise source - Time(s) of operation: 12:00PM - 4	I:00PM	
- Time(s) of pre-event sound chec	ck: 11:00AM	
8. Sound level requested (dBA/Decibels): 95 dBA_		
9. Mailing address w/zip code: 400 Snelling Ave. No		
10. Briefly describe the noise source and equipme	nt involved: DJ with stand spea	akers on Shields Ave. facing North_
11. Describe the steps that will be taken to minimi	ze the noise levels: Every effo	ort will be made to aim speakers away
from residential areas and towards the stadium		
12. State reason for seeking variance (example - m	nusic, announcements, const	truction, etc.):Music/
Announcments		
13. Maximum number of attendees: 500		
14. Describe steps that will be taken to prevent CO well as highly encourage mask wearing for non-vaccinated		
15. A site diagram & map must be attached showing	ng location of noise source(s	s), streets, stages, tents, etc. (If
there will be amplified sound, indicate location ar		
NOTE: Multiple locations may require mo	re than one application.	
16. Submit completed application, site diagram/m	ap, 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 applicable Governor Walz COVID-19 orders relations		•
Signature of responsible person: <u>Zacharia</u>	Litzelswops	Date: 08/18/21
AA-	ADA-EEO Employer	April 2021

Fieldswar Fields

LOCATION: North Exterior

EVENT: Surly & Special Olympics: Polar Plunge







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: 08/30/2021

Received From: ZACHARIA LITZELSWOPE dba: MINNESOTA UNITED FC

400 SNELLING AVE N ST PAUL MN 55104

Description:

Invoice Details Invoice Amount Paid

1111250

Noise Variance \$175.00

TOTAL AMOUNT PAID: \$175.00

Paid By:

Payment Type	Check #	Received Date	Amount
Credit Card	V4511	08/30/2021	\$175.00