DEPARTMENT OF SAFETY AND INSPECTIONS Ricardo X, Cervantes, Director



CITY OF SAINT PAUL

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

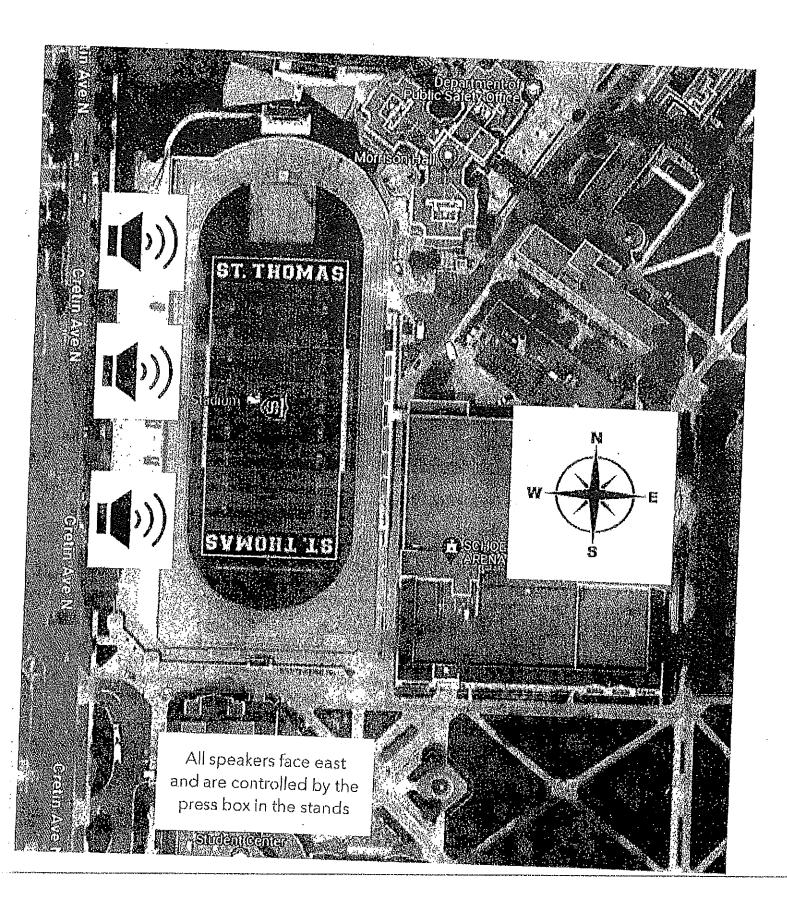
Telephone: 651-266-8989 Facsimile: 651-266-9124 Web: <u>www.stpaul.gov/dsi</u>

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: University of St. Thomas							
2.	Event Name: UST Football Game							
	Address and physical description of St. Paul, Minnesota 55105	of noise source la	ocation (Event, V	Vorksite): 2	2115 Summit Avenue			
4.	Responsible person: Travis Hornik		Title:	UST Assit	ant Athletic Director			
<i>5</i> .	Telephone: 651-962-7922				stthomas.edu			
6.	Date(s) variance requested: 10/04/25, 10/18/2025, 11/01/25, 11/15/25							
7.	Noise source - Time(s) of operation: 11:00 AM - 4:00PM							
	- Time(s) of pre-event	sound check:	10:00 AM		4			
8.	Sound level requested (dBA/Decib							
9.	Mailing address w/zip code: 2115 Summit Avenue St. Paul MN, 55105							
10.	O. Briefly describe the noise source and equipment involved: Stadium Speakers will be playing music and making announcements during the game.							
	area and surrounding neighborh State reason for seeking variance Announcements a	(example - music	c, announcemen					
	A <u>site diagram & map</u> must be att							
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		• •	e to:				
	CITY OF SAINT PAUL DEPARTMENT OF SAFETY AND IN 375 JACKSON STREET, SUITE 220 SAINT PAUL, MN 55101-1806	SPECTIONS						
5ign:	ature of responsible person:	Travis Horni	<u>'K</u>		Date: 4.24.25			





DSI RECEIPT

CITY OF SAINT PAUL
Department of Safety and inspections
375 Jackson Street Suite 220
Saint Paul, Minnesota 55101-1805
Phone: (651) 266-8989 Fax: (651) 266-9124
www.stpaul.gov/dsi

Date: 06/18/2025

Received From: UNIVERSITY OF ST THOMAS dba: O'SHAUGHNESSY STADIUM

2115 SUMMIT AVE ST PAUL MN 55105

Description:

Invoice Details

Invoice Amount

Amount Paid

1179675

Noise Variance

\$1,246.00

\$1,246.00

TOTAL AMOUNT PAID:

\$1,246.00

Paid By:

Payment Type	Check #	Received Date	Amount
Credit Card	V2693	06/18/2025	\$1,246.00