



Sound Level Variance Application

Legislative Code Chapter 293. - Noise Regulations Application and \$178 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.

1. Organization/person seeking variance: TriLingua Cinema
2. Event Name: Summer 2023 Screenings
3. Address and physical description of noise source location (Event, Worksite):
705 E. 7th St. Saint Paul, MN 55106 ie East Side Sculpture Park
4. Responsible person: Geordie Flantz Title: _____
5. Telephone: 507 469 9199 E-Mail: trilinguacinema@gmail.com
6. Date(s) variance requested: 7/29/23, 8/12/2023, 8/26/2023
7. Noise source - Time(s) of operation: 7pm - 11pm
- Time(s) of pre-event sound check: none
8. Sound level requested (dBA/Decibels): 90
9. Mailing address w/zip code: 718 Sims Ave. Saint Paul, MN 55106
10. Briefly describe the noise source and equipment involved: Free outdoor film screenings. The sound comes from 2 powered speakers.
11. Describe the steps that will be taken to minimize the noise levels: _____
Speakers pointed away from residences and toward metro state parking ramp, decibels countinuously monitored.
12. State reason for seeking variance (example - music, announcements, construction, etc.): _____
free community film screenings.
13. Maximum number of attendees: 100
14. A site diagram & map 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.)
15. Submit completed application, site diagram/map, and \$178 fee to:
**CITY OF SAINT PAUL, DEPARTMENT OF SAFETY AND
INSPECTIONS 375 JACKSON STREET, SUITE 220
SAINT PAUL, MN 55101-1806**

I understand any social gathering associated with this variance must be managed in compliance with any applicable Mayor Carter executive order regarding vaccinations, distancing, masks and attendance limits.

Signature of responsible person: _____

Date: _____

6/15/23



705 E 7th St
Paul,
705 E 7th St
44.96°N, 9

Screen

705 E 7th St

Trilingua
Tent

Bates Ave

E 7th St

- +



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: 06/16/2023

Received From: TRILINGUA CINEMA
718 SIMS AVE ST PAUL MN 55106

Description:

Invoice Details

1144988

Noise Variance

Invoice Amount

\$178.00

Amount Paid

\$178.00

TOTAL AMOUNT PAID:

\$178.00

Paid By:

Payment Type	Check #	Received Date	Amount
Credit Card	V1205	06/16/2023	\$178.00