



SAINT PAUL
SAFETY & INSPECTIONS

375 Jackson Street, Suite 220
Saint Paul, MN 55101-1806

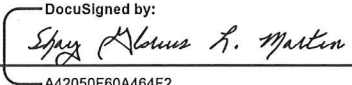
Tel: 651-266-8989 | Fax: 651-266-9124

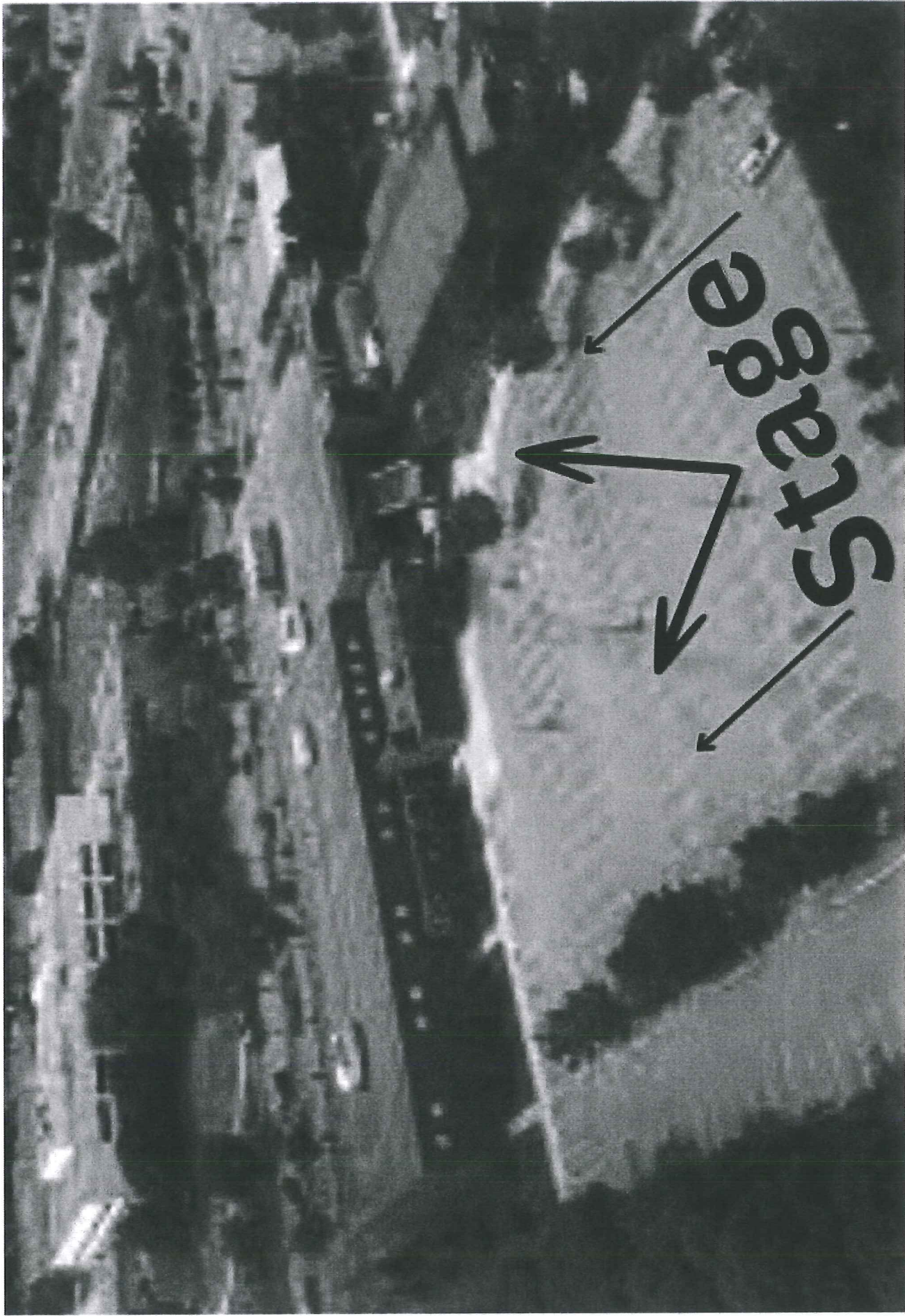
Sound Level Variance Application

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: PackMaterial, LLC / Shay (Glorius) L. Martin
2. Event Name: The BlackOUT Back-To-School/End of Summer Event
3. Address and physical description of noise source location (Event, Worksite): 1063 Iglehart Avenue
The JK Movement / Jimmy Lee Recreation Center Football Field
4. Responsible person: Shay (Glorius) Le Martin Title: Event Organizer
5. Telephone: 651-261-7206 E-Mail: gloriuslmartin@gmail.com
6. Date(s) variance requested: 8/24/24
7. Noise source - Time(s) of operation: 12-6pm
- Time(s) of pre-event sound check: 10:30a-11:30am
8. Sound level requested (dBA/Decibels): Under 100
9. Mailing address w/zip code: 1916 Lamplight Drive 55125
10. Briefly describe the noise source and equipment involved: Outside stage with speakers and subwoofers
4 DB Technology 18" Subwoofers / 4 DB Technology IG3 Column Arrays / 2 EV 12 inch Floor Monitors
11. Describe the steps that will be taken to minimize the noise levels: We will have a sound guy to make sure the
levels stay under the licensed level.
12. State reason for seeking variance (example - music, announcements, construction, etc.): LIVE performances
and djs
13. Maximum number of attendees: 300
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

Signature of responsible person:  Date: 6/15/24



The BlackOUT: End of Summer / Back to School
Event



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: 07/23/2024

Received From: PACKMATERIAL
1916 LAMPLIGHT DR MN 55125

Description:

Invoice Details

1163184
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	V3232	07/23/2024	\$178.00

CITY OF ST PAUL COUNTER
375 JACKSON ST STE 220
SAINT PAUL, MN. 55101
651-266-9111

SALE

REF#: 00000006
Batch #: 467
07/23/24 13:32:21
SVC FEE APPR CODE: 098685
APPR CODE: 005262
Trace: 6
VISA Manual CP
*****3232 **/**

AMOUNT \$178.00
SERVICE FEE \$4.43
TOTAL \$182.43

APPROVED

This transaction includes a non-refundable Service Fee charged by Elavon that will appear on your credit or debit statement as [Elavon-Service Fee]
All Service Fee inquiries should be directed to Elavon 7300 Chapman Hwy Knoxville, TN 37920 800-725-1243 custsvc@elavon.com

**NO REFUNDS ALLOWED
THANK YOU**

CUSTOMER COPY