DEPARTMENT OF SAFETY AND INSPECTIONS Ricardo X. Cervantes, Director



CITY OF SAINT PAUL

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

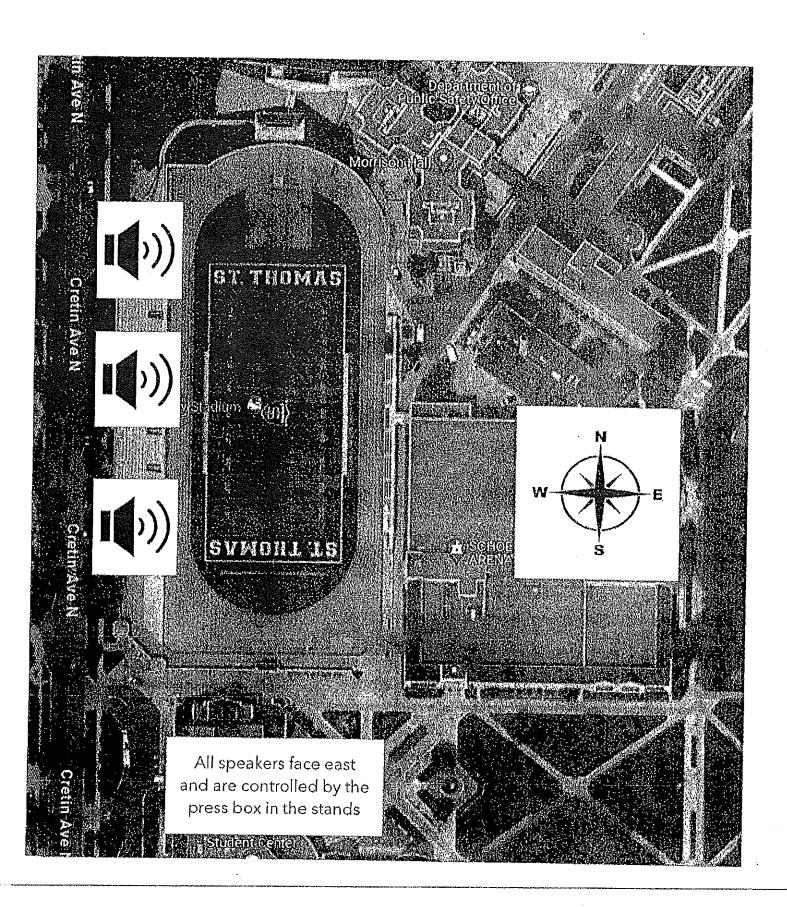
Telephone: 651-266-8989 Pacsimile: 651-266-9124 Web: www.stpaul.govidsi

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 varia	nce: University of St. Thor	nas
2. Event Name: Cretin Derham Hall		
3. Address and physical description of	f noise source location (Eve	nt, Worksite): O'Shaugnessy Stadium 2115
Summit Avenue St. Paul, Minnesota,	55105	
4. Responsible person: Travis Horn	ik	itle: UST Assistant Athletic Director
5. Telephone: 651-962-7922	E-Mail:	travis, hornik@stthomas.edu
6. Date(s) variance requested: 10/2		
7. Noise source - Time(s) of operation	2:00PM - 6:00PM	
- Time(s) of pre-event s	sound check: 1:00PM	
8. Sound level requested (dBA/Decibe	ls): 92 dBA at 50 Feet	
9. Mailing address w/zip code: 2	115 Summit Avenue St. Pa	ul MN, 55105
10. Briefly describe the noise source an making announcements during the	d equipment involved: Sta	adium speakers will be playing music and
11. Describe the steps that will be taken the area and surrounding neighborh	n to minimize the noise lev nood. It will be consistent t	els: The sound level will be monitored in with past football games.
12. State reason for seeking variance (e Announcements and	example - music, announce d music during the games	ments, construction, etc.):
13. A site diagram & man must be atta	ched showing location of n	oise source(s), streets, stages, tents, etc. (If
there will be amplified sound, indicate le		
Multiple locations may require		-
14. Submit completed application, site	• •	
CITY OF SAINT PAUL DEPARTMENT OF SAFETY AND INSI 375 JACKSON STREET, SUITE 220 SAINT PAUL, MN 55101-1806	PECTIONS	·
Signature of responsible person:	Travis Hornik	5-14-25 Date:





DSI RECEIPT

CITY OF SAINT PAUL

Department of Safety and Inspections 375 Jackson Street Suite 220 Saint Paul, Minnesola 55101-1806 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