

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: \_\_\_\_\_
- 2. Event Name:
- **3.** Address and physical description of noise source location (Event, Worksite):

4. Responsible person: Title:
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- 5. Telephone:\_\_\_\_\_\_E-Mail: \_\_\_\_\_\_
- **6.** Date(s) variance requested:
- 7. Noise source Time(s) of operation: \_\_\_\_\_
  - Time(s) of pre-event sound check: \_\_\_\_\_\_
- 8. Sound level requested (dBA/Decibels): \_\_\_\_\_\_
- **9.** Mailing address w/zip code:

**10.** Briefly describe the noise source and equipment involved:

**11.** Describe the steps that will be taken to minimize the noise levels:

**12.** State reason for seeking variance (example - music, announcements, construction, etc.):

**13.** Maximum number of attendees:

**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: \_\_\_\_\_