



Amplified Sound Permit Application
(Legislative Code Chapter 293. - Noise Regulations)

Amplified Sound Permit applications must be submitted fourteen (14) calendar days in advance of the date of the associated activity or event. Incomplete applications will not be accepted. Permits may include dates substantially similar in nature. Any activity or event taking place without an Amplified Sound Permit must comply with the noise limits defined in Table 1 of Legislative Code Chapter 293.

Permit applications must include:

- **This fully completed application form**
- **A diagram/map showing the precise location of the sound source**
- **\$138 fee**

1. Organization or name of person seeking Permit: _____
2. Event Name: _____
3. Address and physical description of noise source location: _____

a. Is the noise source located on Parks and Recreation property? Yes ___ No ___
4. Responsible person: _____ Title: _____
5. Telephone: _____ E-Mail: _____
6. Date(s) of Activity or Event: _____
7. Permit Hours requested (start to finish): _____
8. Sound level requested in decibels (Residential Area: cannot exceed 80 dBA measured at 50 feet from the sound source; Non-Residential Area: cannot exceed 90 dBA measured at 50 feet from the sound source): _____
9. Applicants mailing address w/zip code: _____
10. Briefly describe the noise source and equipment involved: _____

11. Describe the steps that will be taken to ensure noise does not exceed authorized level: _____

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

13. Maximum number of attendees: _____

Fully completed applications, diagrams/map, and \$138 fee should be submitted to one of the following two locations based on the event's location:

Residential and Non-Residential:
City of Saint Paul, Department of Safety and Inspections
375 Jackson Street #220
Saint Paul, MN, 55101

OR

Parks:
City of Saint Paul, Parks and Recreation
Attn. Kate Frye
1100 Hamline Avenue North
Saint Paul, MN 55108

Signature of responsible person: _____ Date: _____