E 7/2

SAINT PAUL
SAFETY & INSPECTIONS

DEPARTMENT OF SAFETY & INSPECTIONS (DSI)
ANGIE WIESE, DIRECTOR

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.

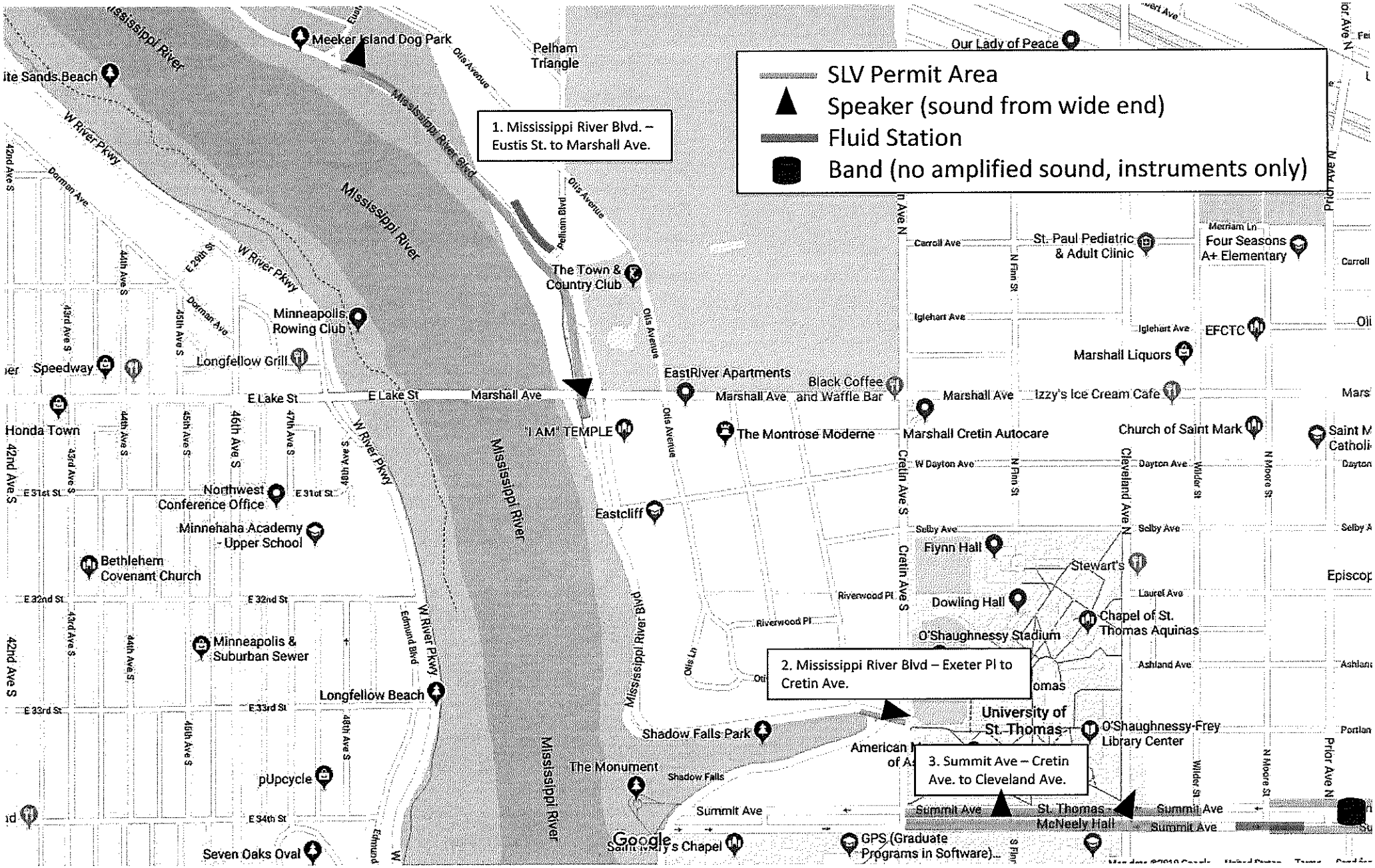
1. *Organization/person seeking variance:* Twin Cities In Motion
2. *Event Name:* Medtronic Twin Cities Marathon Weekend
3. *Address and physical description of noise source location (Event, Worksite):* Minnesota State Capitol Grounds, 75 Rev Dr Martin Luther King Jr Blvd, St Paul, MN 55115
4. *Responsible person:* Sam Rush *Title:* Event Operations Manager
5. *Telephone:* 651-289-7706 *E-Mail:* samr@tcmevents.org
6. *Date(s) variance requested:* Saturday, October 5, 2024 & Sunday, October 6, 2024
7. *Noise source - Time(s) of operation:* 7:30am-2:30pm - 10/6/24; 7:00am-12:00pm - 10/5/24
   - Time(s) of pre-event sound check: 7:15am-7:30am - 10/6; 6:30am-7:00am - 10/5
8. *Sound level requested (dBA/Decibels):* Up to 85 decibels
9. *Mailing address w/zip code:* 355 Randolph Ave, Suite 200, St Paul, MN 55102
10. *Briefly describe the noise source and equipment involved:* Event announcements and music using microphones and music connected to a speaker system
11. *Describe the steps that will be taken to minimize the noise levels:* Position speakers so they face the roadway and keep the decibel levels minimized.
12. *State reason for seeking variance (example - music, announcements, construction, etc.):* Event related announcements and entertainment
13. *Maximum number of attendees:* 6,000 Sat 16,000 Sun
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: Sam Rush **Date:** 07/01/2024

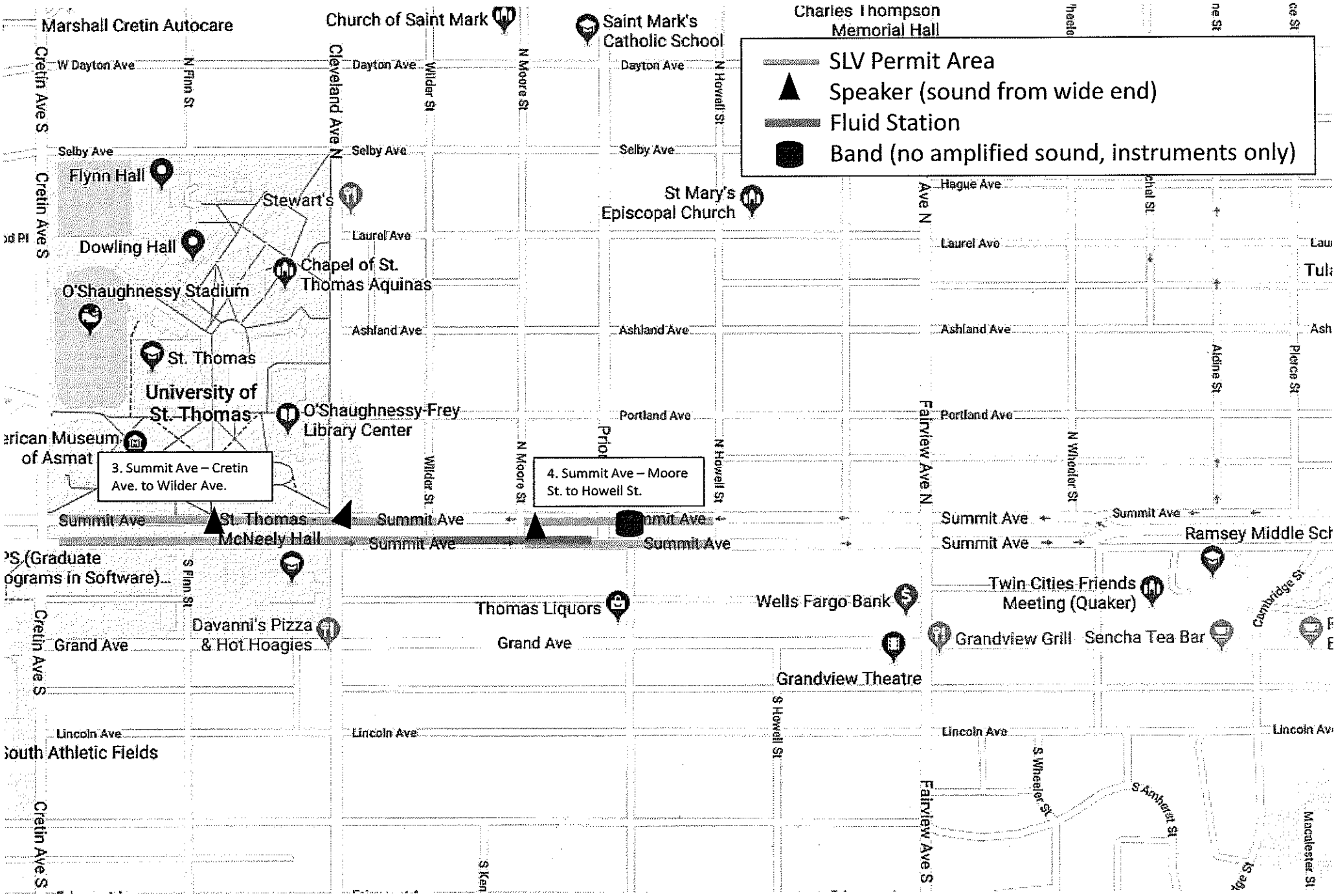
2024 MEDTRONIC TWIN CITIES MARATHON

Sound Level Variance Permit Application – Course Locations



2024 MEDTRONIC TWIN CITIES MARATHON

Sound Level Variance Permit Application – Course Locations



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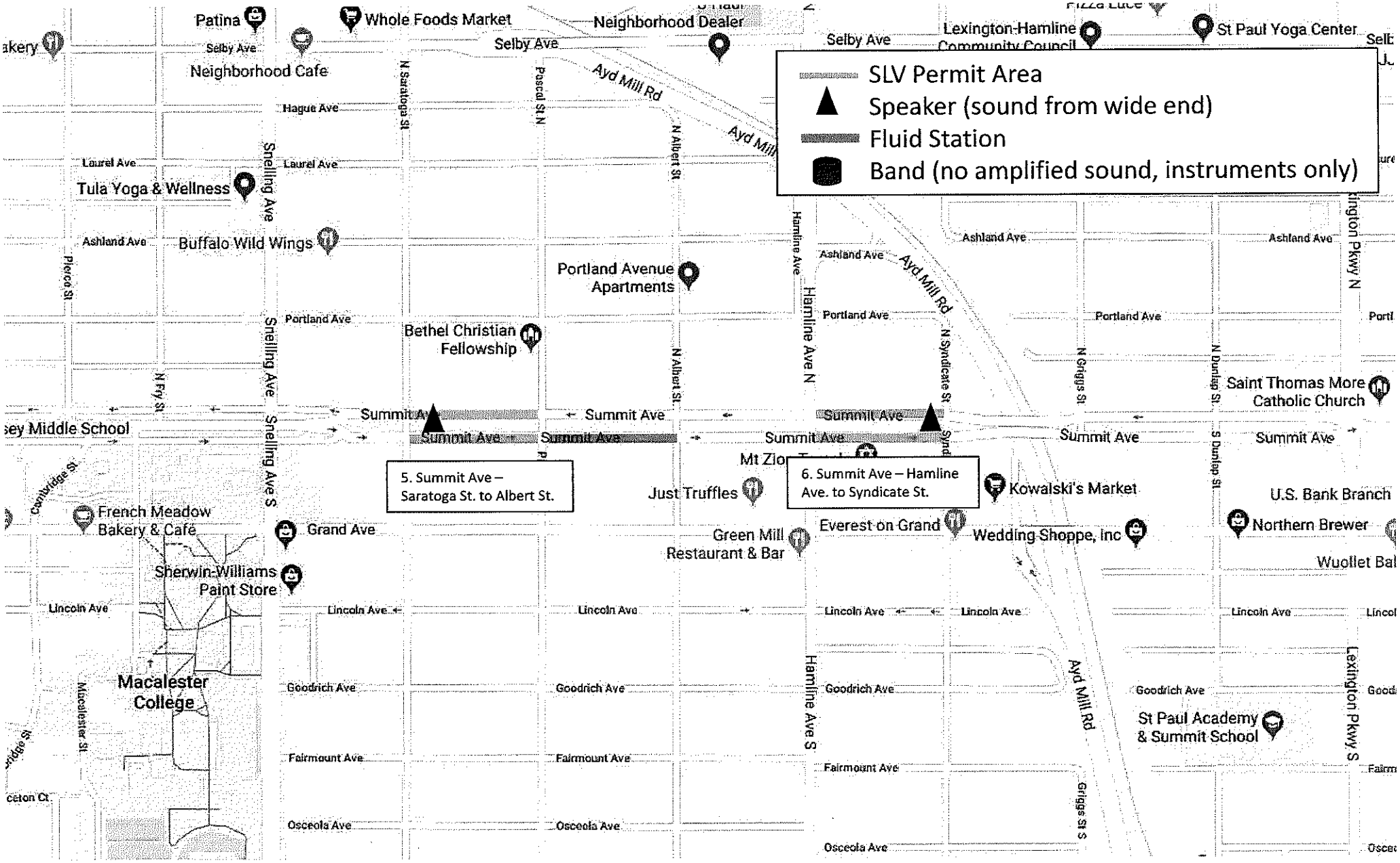

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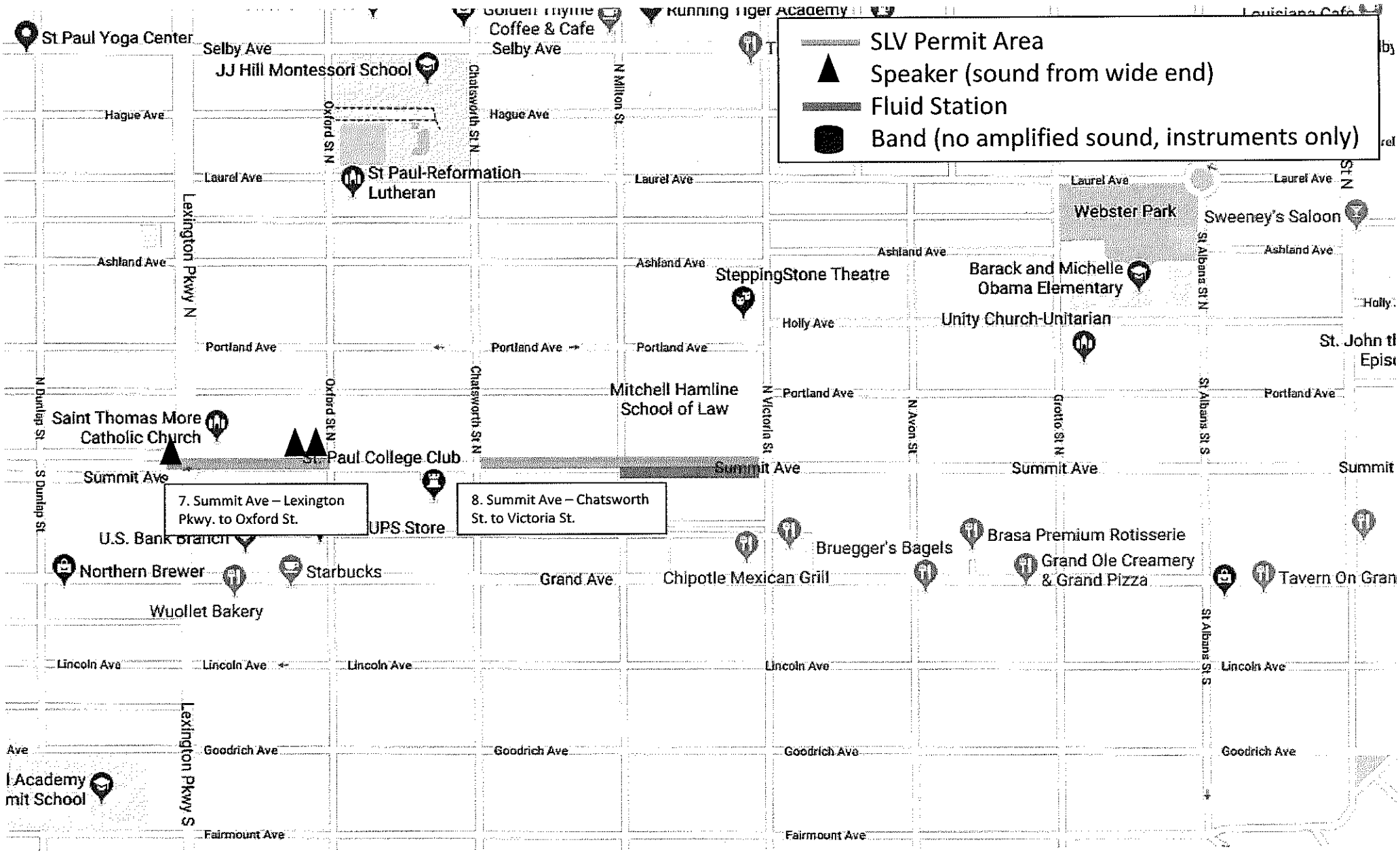
Sound Level Variance Permit Application – Course Locations



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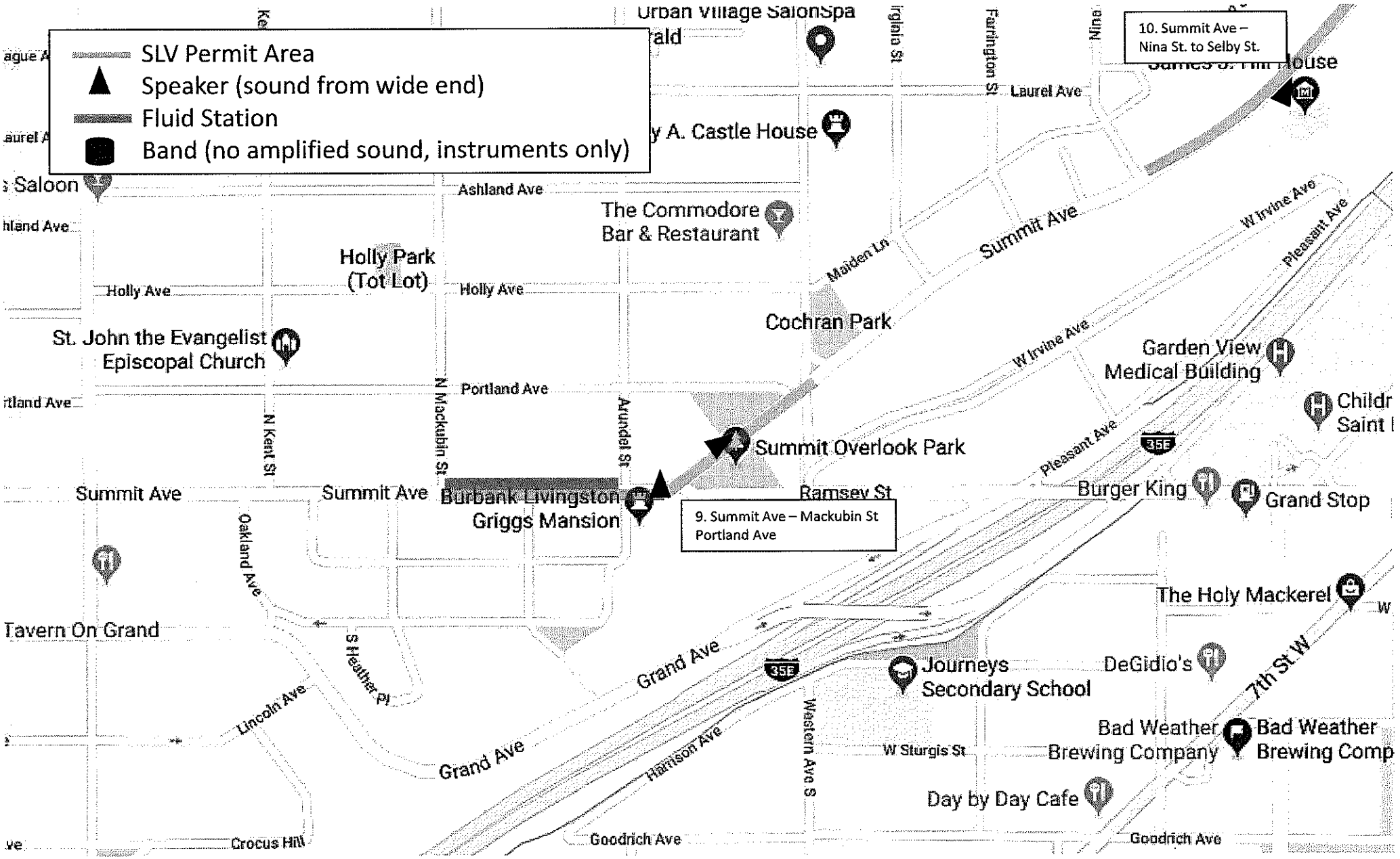

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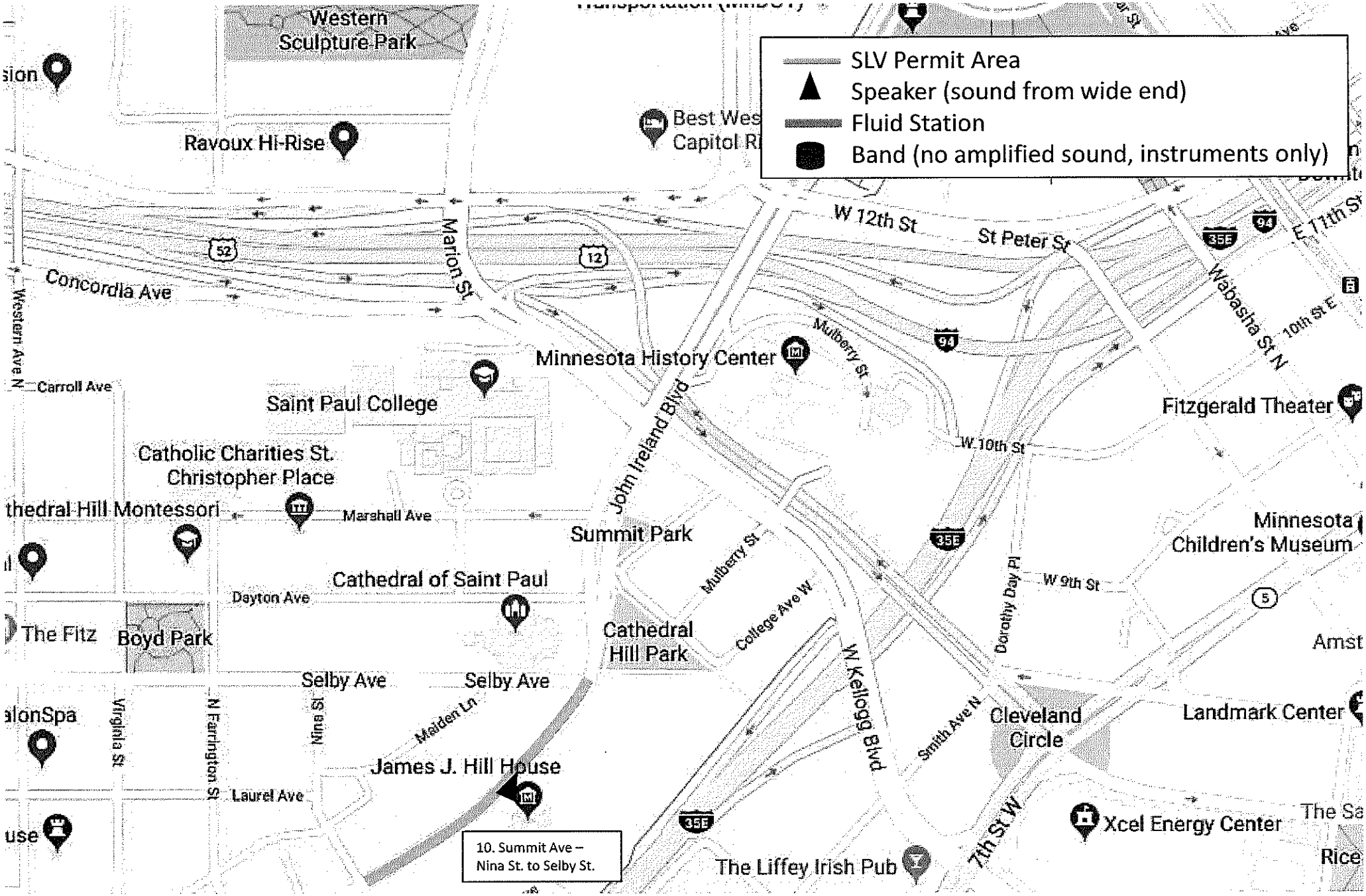
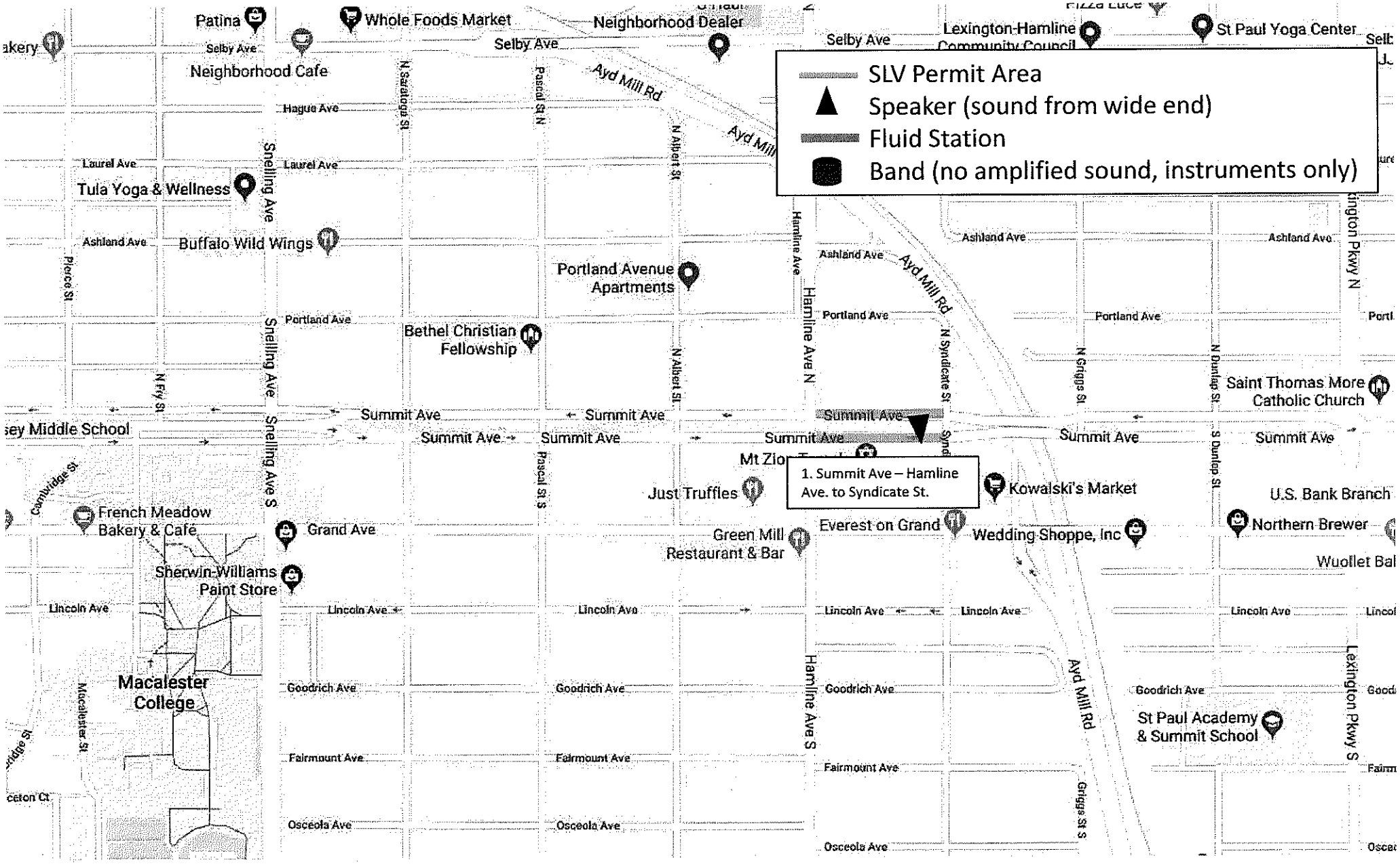


2024 MEDTRONIC TWIN CITIES MARATHON SATURDAY EVENTS

MEDTRONIC TWIN CITIES MARATHON WEEKEND

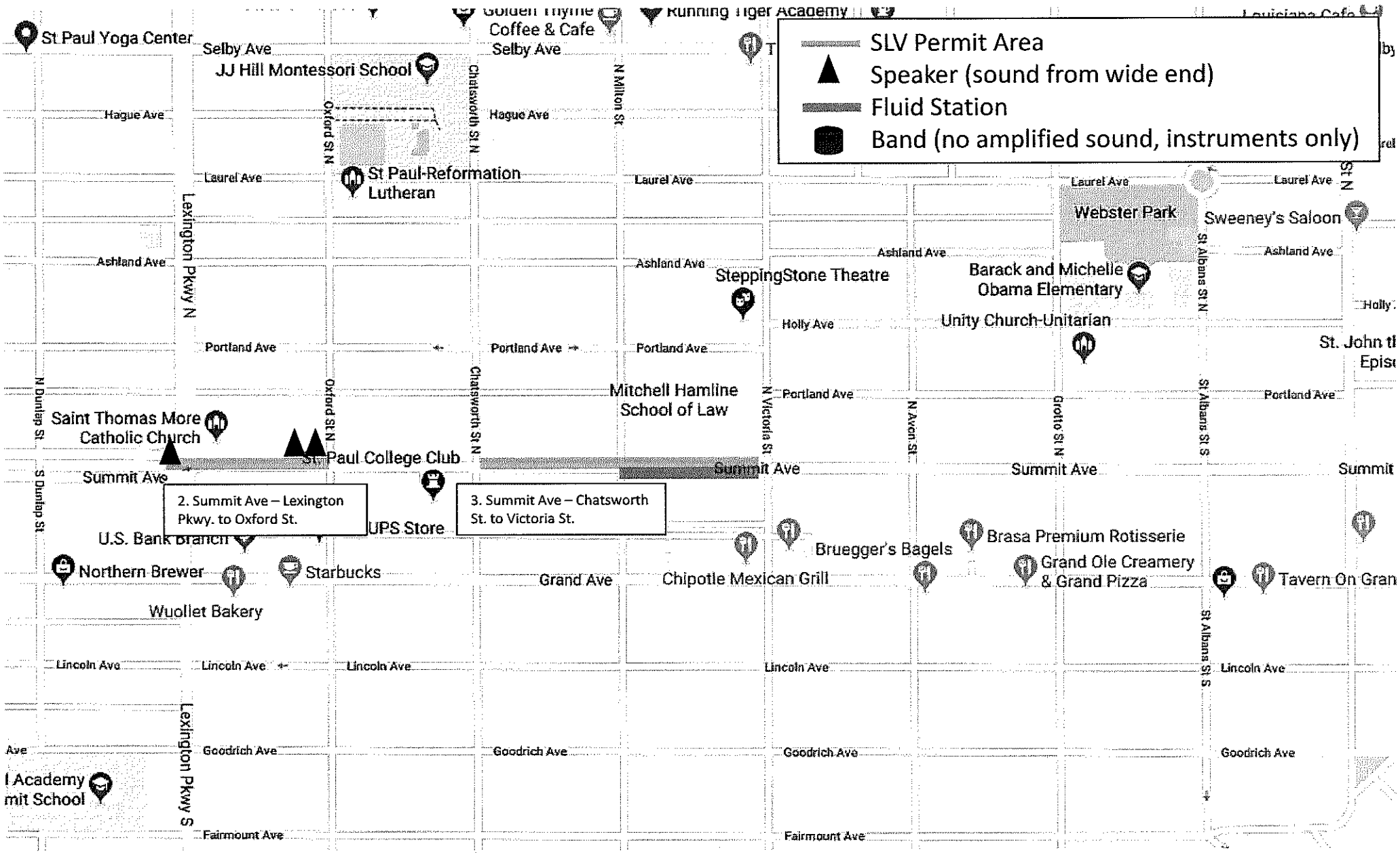
Sound Level Variance Permit Application – Course Locations



2024 MEDTRONIC TWIN CITIES MARATHON SATURDAY EVENTS

Sound Level Variance Permit Application – Course Locations

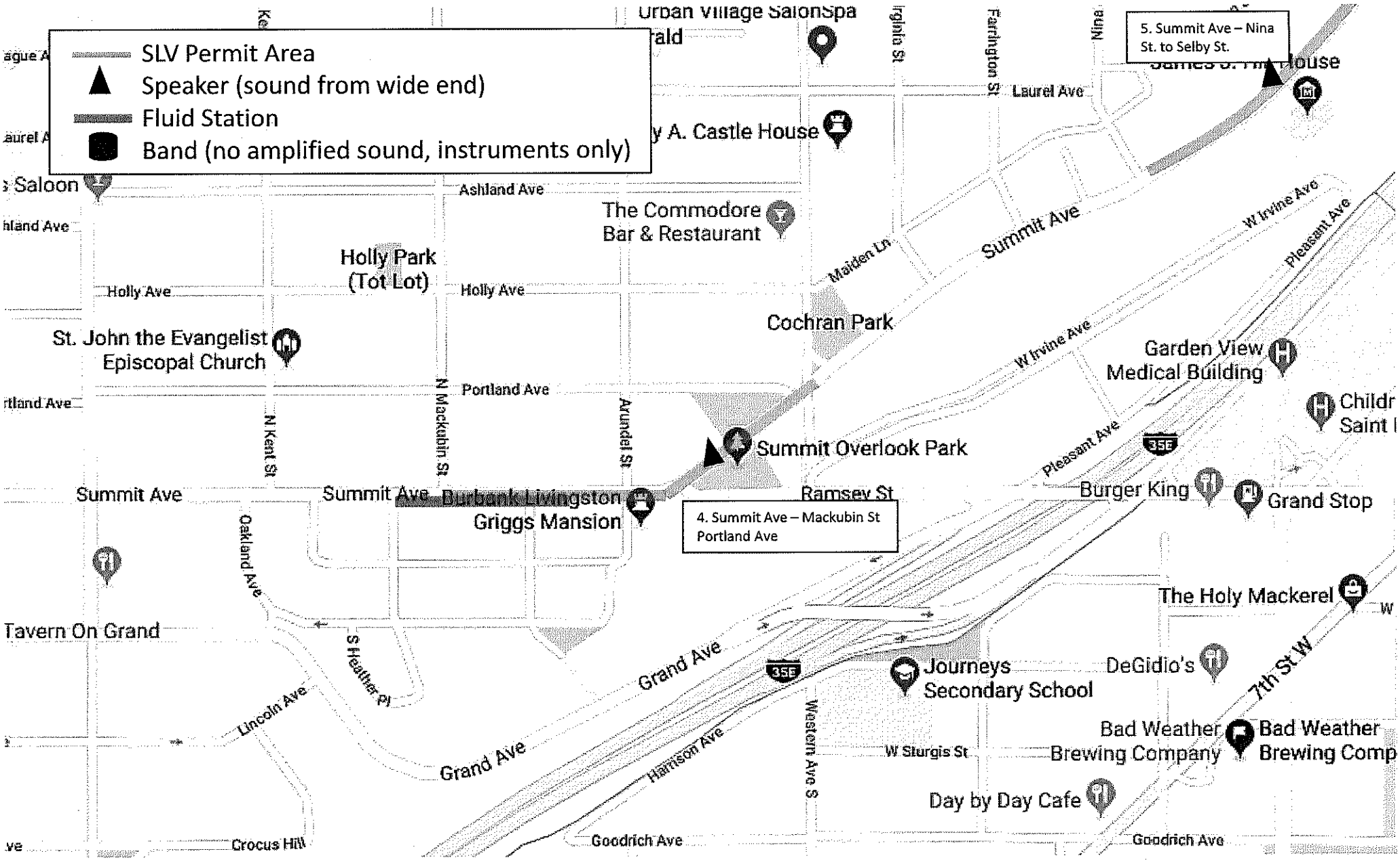
MEDTRONIC TWIN CITIES MARATHON WEEKEND



2024 MEDTRONIC TWIN CITIES MARATHON SATURDAY EVENTS

Sound Level Variance Permit Application – Course Locations

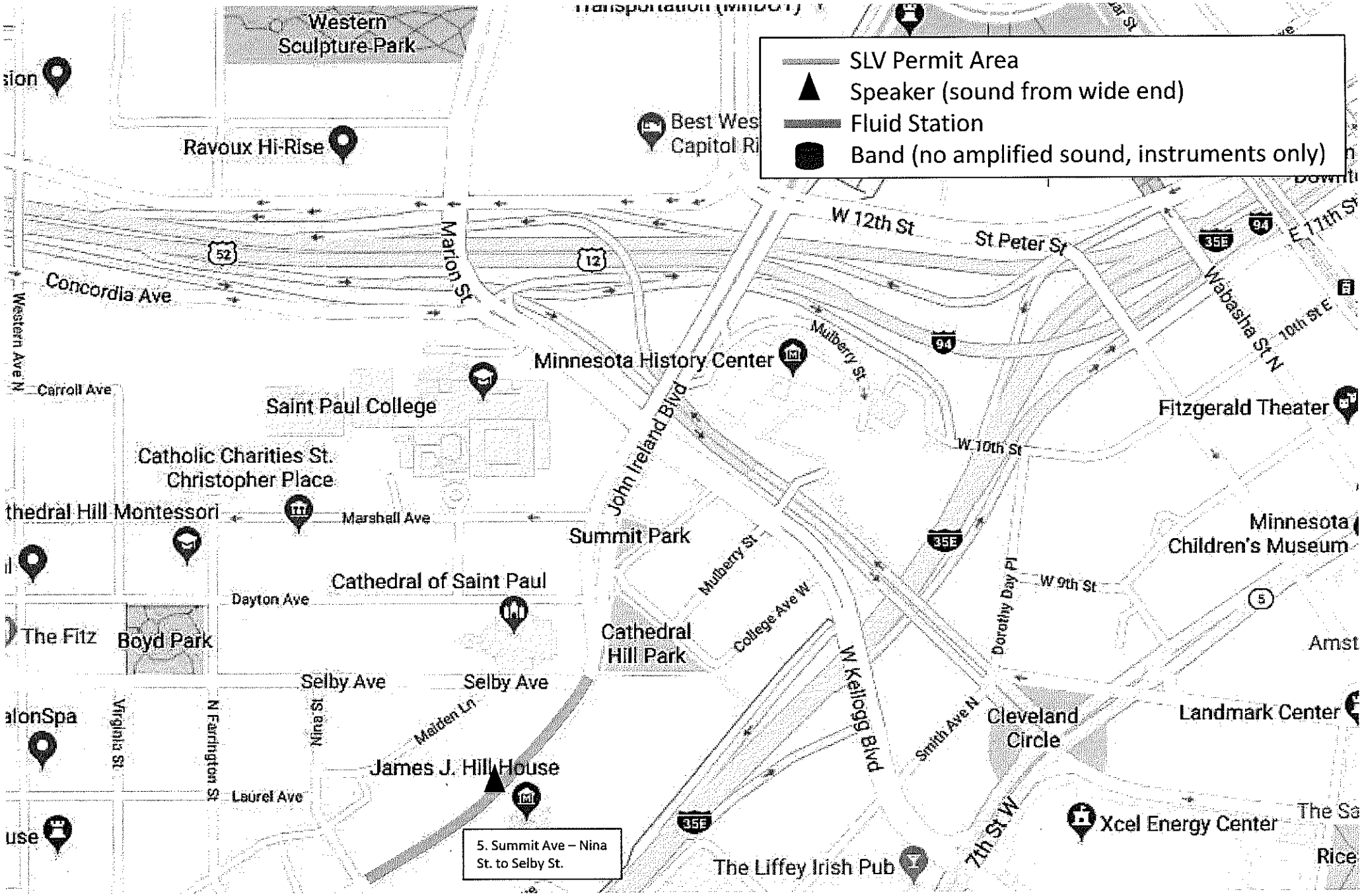
MEDTRONIC TWIN CITIES MARATHON WEEKEND



2024 MEDTRONIC TWIN CITIES MARATHON SATURDAY EVENTS

Sound Level Variance Permit Application – Course Locations

MEDTRONIC TWIN CITIES MARATHON WEEKEND



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: 08/05/2024

Received From: TWIN CITIES IN MOTION
355 RANDOLPH AVE STE 200 ST PAUL MN 55102

Description:

Invoice Details	Invoice Amount	Amount Paid
1163739		
Noise Variance	$356.00	$356.00

TOTAL AMOUNT PAID: **$356.00**

Paid By:

Payment Type	Check #	Received Date	Amount
Credit Card	V5790	08/05/2024	$356.00

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1. *Organization/person seeking variance:* Twin Cities In Motion
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3. *Address and physical description of noise source location (Event, Worksite):* Summit Ave (see attached for Sat (5) & Sun (8)); Sun only - Mississippi River Blvd East's to Marshall
4. *Responsible person:* Sam Rush *Title:* Event Operations Manager
5. *Telephone:* 651-289-7706 *E-Mail:* samr@tcmevents.org
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Signature of responsible person: Sam Rush **Date:** 07/01/2024

Sound Level Variance Application Addendum 2024

Organization: Twin Cities In Motion

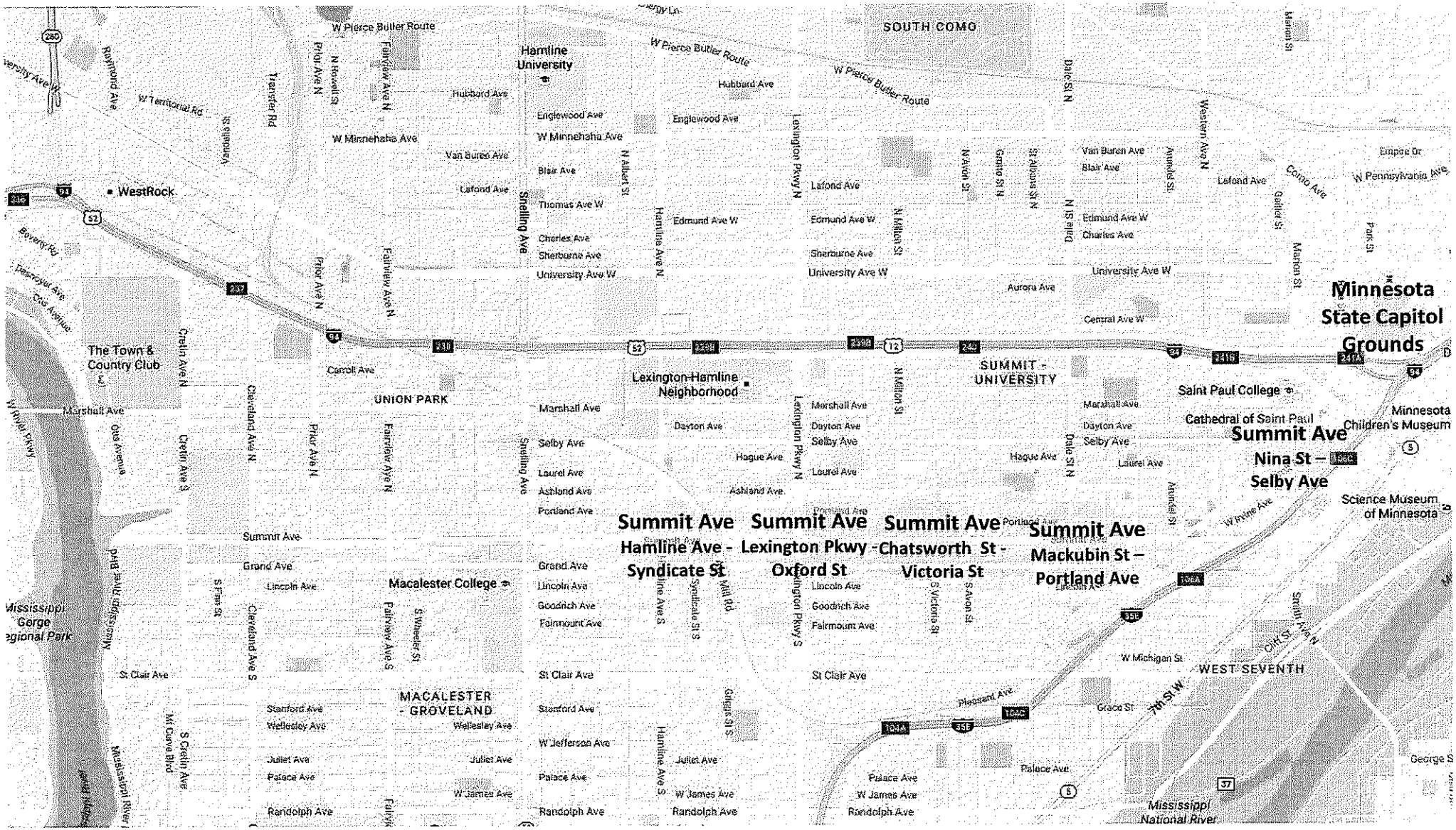
Event Name: Medtronic Twin Cities Marathon Weekend

Address of noise source location:

- Saturday & Sunday – Summit Ave:
    - Hamline Ave to Syndicate St
    - Lexington Pkwy to Oxford St
    - Chatsworth St to Victoria St
    - Mackubin St to Portland Ave
    - Nina St to Selby St
- Sunday only – Summit Ave:
    - Cretin Ave to Wilder Ave
    - Moore St to Howell St
    - Saratoga St to Albert St

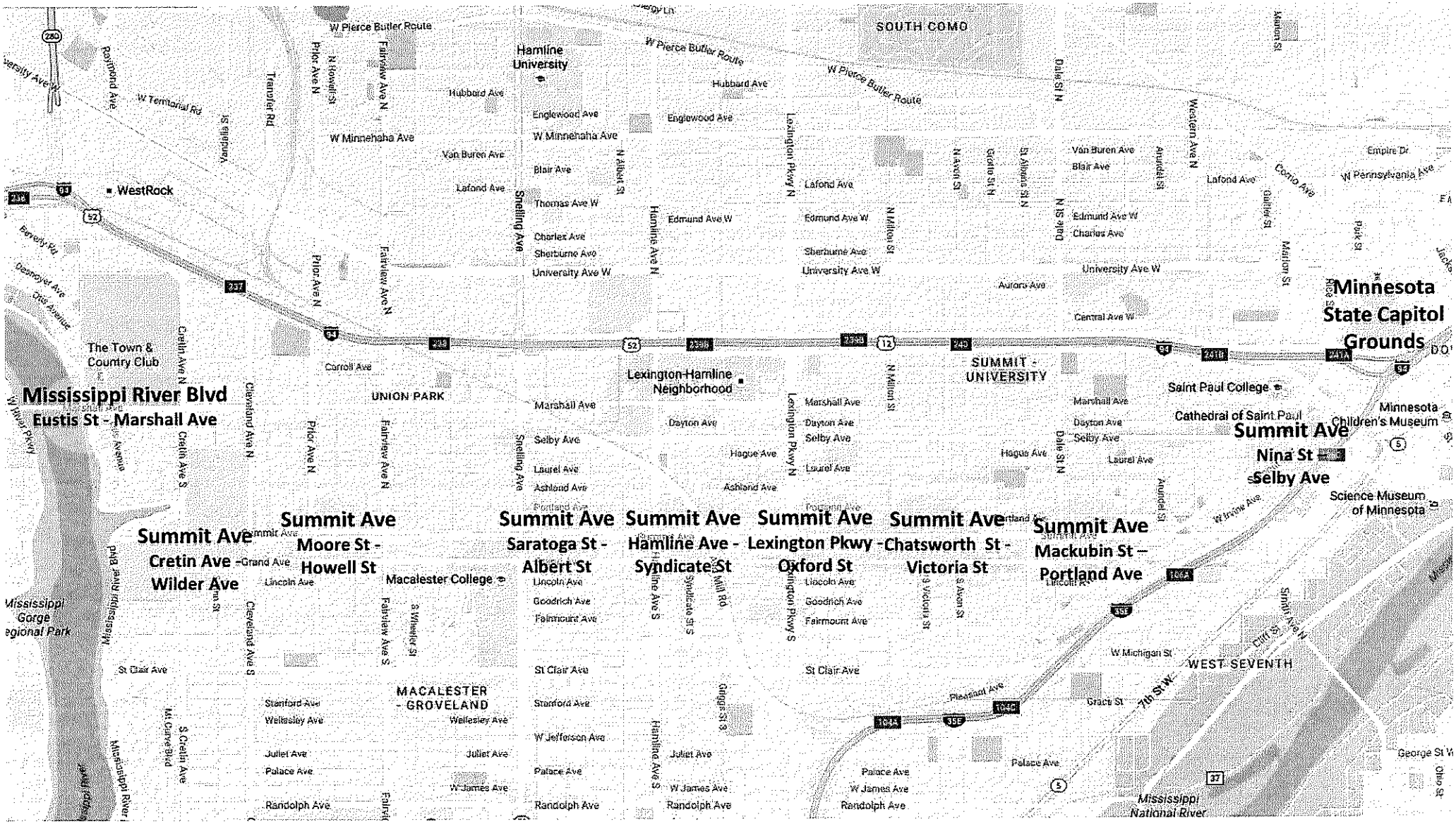
2024 Medtronic Twin Cities Marathon Weekend – Saturday Events

St. Paul Sound Level Variance Permit Application - Locations



2024 Medtronic Twin Cities Marathon Weekend

St. Paul Sound Level Variance Permit Application - Locations



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