

CITY OF SAINT PAUL

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

Telephone: 651-266-8989
Facsimile: 651-266-9124
Web: www.stpaul.gov/dsi



Sound Level Variance Application

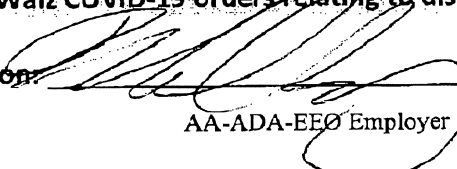
Legislative Code Chapter 293. - Noise Regulations

Application and \$175 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: MEEFY BEAT INC
2. Event Name: St PATRICKS DAY
3. Address and physical description of noise source location (Event, Worksite): 995 WEST 7th Street St Paul MN 55102
4. Responsible person: Michael Runyon Title: owner
5. Telephone: 651-485-1383 E-Mail: mcrun52009@yahoo.com
6. Date(s) variance requested: 3/17/22
7. Noise source - Time(s) of operation: 9am - 12am
- Time(s) of pre-event sound check: 9am
8. Sound level requested (dBA/Decibels): NA / 120
9. Mailing address w/zip code: SAA
10. Briefly describe the noise source and equipment involved: stage with amplified sound for 2 bands
11. Describe the steps that will be taken to minimize the noise levels: TENT - POINTING AWAY FROM neighborhood, we also measure sound every hr.
12. State reason for seeking variance (example - music, announcements, construction, etc.): music
13. Maximum number of attendees: NA
14. Describe steps that will be taken to prevent COVID-19 virus spread: RESTAURANT IS CURRENTLY CLOSED and doing all COVID 19 protocols
15. 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.
16. Submit completed application, site diagram/map, and \$175.00 fee to:

CITY OF SAINT PAUL
DEPARTMENT OF SAFETY AND INSPECTIONS
375 JACKSON STREET, SUITE 220
SAINT PAUL, MN 55101-1806

I understand that any social gathering associated with this variance must be managed in full compliance with all applicable Governor Walz COVID-19 orders relating to distancing, masks and attendance limits.

Signature of responsible person: 

Date: 1/21/22

AA-ADA-EEØ Employer