Received

DEPARTMENT OF SAFETY & INSPECTIONS (DSI)



JUL 2 5 2022

City of Saint Paul - DSI

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: Stone Salson, Sbu dbg Waldmann
2. Event Name: Waldmann Oktobertest
3. Address and physical description of noise source location (Event, Worksite): 445 Smy The Hye N
on south side of building in our outdoor patro space
4. Responsible person: 10m Solliveder Title: Wes/CEO
5. Telephone: 612-385-8838 E-Mail: for waldmann brewerge com
6. Date(s) variance requested: $9/23 - 25$; $9/30 - 10/2$
7. Noise source - Time(s) of operation: noon - 10pm on 9/23, 9/24, 9/30 & 10/1; noon - 7pm or
- Time(s) of pre-event sound check: 1 hr. prior 9/25&10/2
8. Sound level requested (dBA/Decibels): 85 db
9. Mailing address w/zip code: Waldmann Brewery, 445 Smith Av N, St. Pom 55102
10. Briefly describe the noise source and equipment involved: Music and announcements
from PA sistem Samsung Epid . XP300 or equiv.) with 2 stand-speakers
11. Describe the steps that will be taken to minimize the noise levels: Smit a dherand to event
ending times, periodic decibel testing and responsible sound monitoring
12. State reason for seeking variance (example - music, announcements, construction, etc.): To enable
13. Maximum number of attendees: 75 indeas, 125 outdoos
14. A <u>site diagram & map</u> 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: 421/22

Smith Ave



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: 07/27/2022

Received From: STONE SALOON SBC dba: WALDMANN

194 MCBOAL ST ST PAUL MN 55102

Description:

Invoice Details

Invoice Amount

Amount Paid

1128003

Noise Variance

\$178.00

\$178.00

TOTAL AMOUNT PAID:

\$178.00

Paid By:

Payment Type	Check #	Received Date	Amount
Check	4778	07/27/2022	\$178.00