

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: MEEFY BOAT INC D.B.A SHAMROCKS
2. Event Name: St Patricks Day Weekend
3. Address and physical description of noise source location (Event, Worksites):
995 WEST 7th Street St Paul MN 55102 (PARKING LOT)
4. Responsible person: Michael Runyon Title: Owner
5. Telephone: 651-228 9925 E-Mail: mcrun5209@yahoo.com
6. Date(s) variance requested: 3/17/23
7. Noise source - Time(s) of operation: 10am - 11:59pm
- Time(s) of pre-event sound check: 9am
8. Sound level requested (dBA/Decibels): 100
9. Mailing address w/zip code: 995 west 7th street St Paul 55102
10. Briefly describe the noise source and equipment involved: LIVE BANDS, w Monitors and sound boards
11. Describe the steps that will be taken to minimize the noise levels: Face Equipment away from neighborhoods, sound level monitoring every hr (by sound guy)
12. State reason for seeking variance (example - music, announcements, construction, etc.):
music amplified for event
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: [Signature] Date: 1/29/23

80x40 Tent

30x30+62+

STAGE

GR

BAR

BEER TRUCK

FOOD TRUCK

BRUNCH

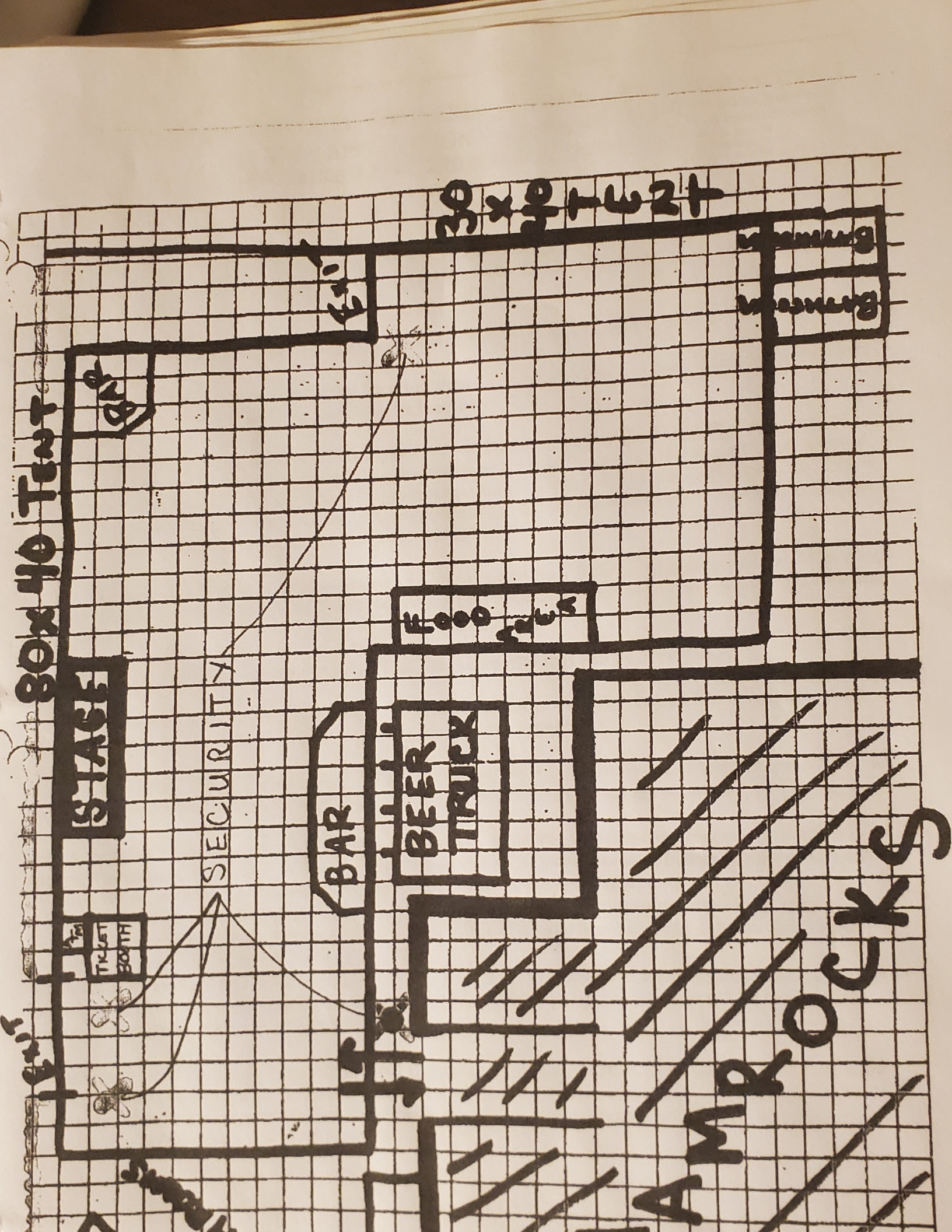
SECURITY

TICKET BOOTH

AMROCKS

EXIT

EXIT





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: 01/26/2023

Received From: MEEFY BEAT INC dba: SHAMROCK'S IRISH NOOK
208 AMHERST ST ST PAUL MN 55105-1912

Description:

Invoice Details

1140630

Noise Variance

Invoice Amount

\$178.00

Amount Paid

\$178.00

TOTAL AMOUNT PAID:

\$178.00

Paid By:

Payment Type	Check #	Received Date	Amount
Check	21380	01/26/2023	\$178.00