

Received

DEPARTMENT OF SAFETY & INSPECTIONS (DSI)



SAINT PAUL
SAFETY & INSPECTIONS

JAN 21 2025

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: JRMacs
2. Event Name: Saint Patrick's Day Fest
3. Address and physical description of noise source location (Event, Worksite):
1420 W. 7th St St. Paul
4. Responsible person: Dan McQuillan Title: President
5. Telephone: 651-260-6806 E-Mail: DMCQUILLAN@Gmail.com
6. Date(s) variance requested: 3/15/25 + 3/17/25
7. Noise source - Time(s) of operation: 4-10 P.M.
- Time(s) of pre-event sound check: 3:PM
8. Sound level requested (dBA/Decibels): _____
9. Mailing address w/zip code: 1420 W. 7th St
10. Briefly describe the noise source and equipment involved: 3 Piece Band.
11. Describe the steps that will be taken to minimize the noise levels: Inside of a tent will be 6th few never any complaints
12. State reason for seeking variance (example - music, announcements, construction, etc.): music
13. Maximum number of attendees: 100
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: Dan McQuillan Date: 1-21-25

W. 7th Street

side walk

30

30

Tent

Deck

JR Macs

Bar

Buildings

OTTO

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: 01/21/2025

Received From: J R MAC INC dba: J R MAC'S
1420 7TH ST W ST PAUL MN 55102-4206

Description:

Invoice Details

1174819

Noise Variance

Invoice Amount

\$178.00

Amount Paid

\$178.00

TOTAL AMOUNT PAID:

\$178.00

Paid By:

Payment Type	Check #	Received Date	Amount
Credit Card	AE4002	01/21/2025	\$178.00

CITY OF ST PAUL COUNTER
375 JACKSON ST STE 220
SAINT PAUL MN 55101
651-266-9111

SALE

REF#: 000000005

Batch #: 554

01/21/25

11:25:40

SVC FEE APPR CODE: 140683

APPR CODE: 106668

Trace: 5

AMEX

*****4002

Manual CP

AMOUNT

\$178.00

SERVICE FEE

\$4.43

TOTAL

\$182.43

APPROVED

This transaction includes a non-refundable
Service Fee charged by Elavon that will appear
on your credit or debit statement as

[Elavon-Service Fee]

All Service Fee inquiries should be directed to
Elavon 7300 Chapman Hwy Knoxville,
TN 37920 800-725-1712

custsvc@elavon.com

NO REFUNDS ALLOWED

THANK YOU

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