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APR 1 1 2025

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

City of Saint Paul - DSI

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: Wahasha Brewing Co/Deana Vastine	
2. Event Name: Music at Wabasha	
3. Address and physical description of noise source location (Event, Worksite): 429 Wabasha St. S	
live music on portio	
4. Responsible person: Deanna Vastine Title: Events manager	
5. Telephone: 7/03-245-7293 E-Mail: Olanna @ Wabasha Orzwing. U	OM
6. Date(s) variance requested: My 3, 10, 24 June 7, 14, 21, 29	
7. Noise source - Time(s) of operation: 1-9 pm	
- Time(s) of pre-event sound check: 12:30 pm	
8. Sound level requested (dBA/Decibels): 90 decibels	
9. Mailing address w/zip code: 424 Wabasha St S St Paul, Mn 55107	
10. Briefly describe the noise source and equipment involved: Live acoustic music with	
amplifier. Instruments may vary with vocals, quitar, keyboard, harmonica	
11. Describe the steps that will be taken to minimize the noise levels: Amplifier will face	
Wahasha St away from neighborhood. Hourly sound checks to monitor	
12. State reason for seeking variance (example - music, announcements, construction, etc.):	
17 MUSIC	
13. Maximum number of attendees:	
(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	
Signature of responsible person: Date: 2.19.25	