



15264
SAINT PAUL
SAFETY & INSPECTIONS

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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.

Received

APR 25 2024

- Organization/person seeking variance: Wabasha Brewing
- Event Name: Summer Live Music
- Address and physical description of noise source location (Event, Worksite): City of Saint Paul - DSI
429 Wabasha St S Saint Paul MN 55107
- Responsible person: Cassidy Bruggeman Title: Events manager
E-Mail: Cassidy@wabashabrewing.com
- Telephone: 218 242 4620
- Date(s) variance requested: May 25th, June 15th, July 6th, July 20th, August 17th
- Noise source - Time(s) of operation: 2PM - 8PM
- Time(s) of pre-event sound check: 1:30
- Sound level requested (dBA/Decibels): 80
- Mailing address w/zip code: 429 Wabasha St S Saint Paul MN 55107
- Briefly describe the noise source and equipment involved: Live music 2-3 ppl max acoustic with mic vocals
- Describe the steps that will be taken to minimize the noise levels: Noise will face away from Residential Area
- State reason for seeking variance (example - music, announcements, construction, etc.): Live music
- Maximum number of attendees: 100
- 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.)
- 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: Cassidy Bruggeman Date: 4/24/24



DSI RECEIPT

CITY OF SAINT PAUL

Department of Safety and Inspections
375 Jackson Street Suite 220
Saint Paul, Minnesota 55101-1806
Phone: (651) 266-8969 Fax: (651) 266-9124
www.stpaul.gov/dsi

Date: 05/08/2024

Received From: WABASHA BREWING COMPANY LLC dba: WABASHA BREWING COMPANY
429 WABASHA ST S UNIT B ST PAUL MN 55107

Description:

Invoice Details

1161021

Noise Variance

Invoice Amount

\$178.00

Amount Paid

\$178.00

TOTAL AMOUNT PAID:

\$178.00

Paid By:

Payment Type	Check #	Received Date	Amount
Check	2818	05/08/2024	\$178.00