



CITY OF SAINT PAUL

Business Licensing
375 Jackson Street, Suite 220
Saint Paul, Minnesota 55101-1806

Telephone: 651-2668989
Facsimile: 651-266-9124
Web: www.stpaul.gov/dsi

Sound Level Variance Application Legislative Code Chapter 293. - Noise Regulations

Application and \$172 fee payment should be submitted a minimum of sixty (60) days prior to the scheduled event start date. A public notification period is required prior to scheduling the application's Public Hearing before the Saint Paul City Council. Applications received fewer than sixty (60) days prior to the event may not satisfy the ordinance's processing timelines for placement on the Council's agenda.

1. Organization/person seeking variance: FIVE WATT COFFEE (KEGA & CASE COFFEE LLC)
2. Event Name: RADIO FIVE WATT MUSIC FEST
3. Address and physical description of noise source location (Event, Worksite): (KEGA & CASE MARKET)
928 7TH ST W ST. PAUL MN 55102
4. Responsible person: CALEB GARN Title: OWNER FIVE WATT COFFEE
5. Telephone: 517-227-7598 E-Mail: calebgarn@gmail.com
6. Date(s) variance requested: SEPT 8TH 2019
7. Noise source - Time(s) of operation: 10 AM TO 5 PM
- Time(s) of pre-event sound check: 9 AM
8. Sound level requested (dBA/Decibels): 90 - 100
9. Mailing address w/zip code: 2904 HARRIET AVE S MPLS MN 55408
10. Briefly describe the noise source and equipment involved: LIVE BANDS WITH DRUMS, BASS & GUITARS, MID SIZED PA SYSTEM
11. Describe the steps that will be taken to minimize the noise levels: TURN DOWN PA IF EXCESSIVE
12. State reason for seeking variance (example - music, announcements, construction, etc.): LIVE MUSIC
13. 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.
14. Submit completed application, site diagram/map, and \$172.00 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: _____

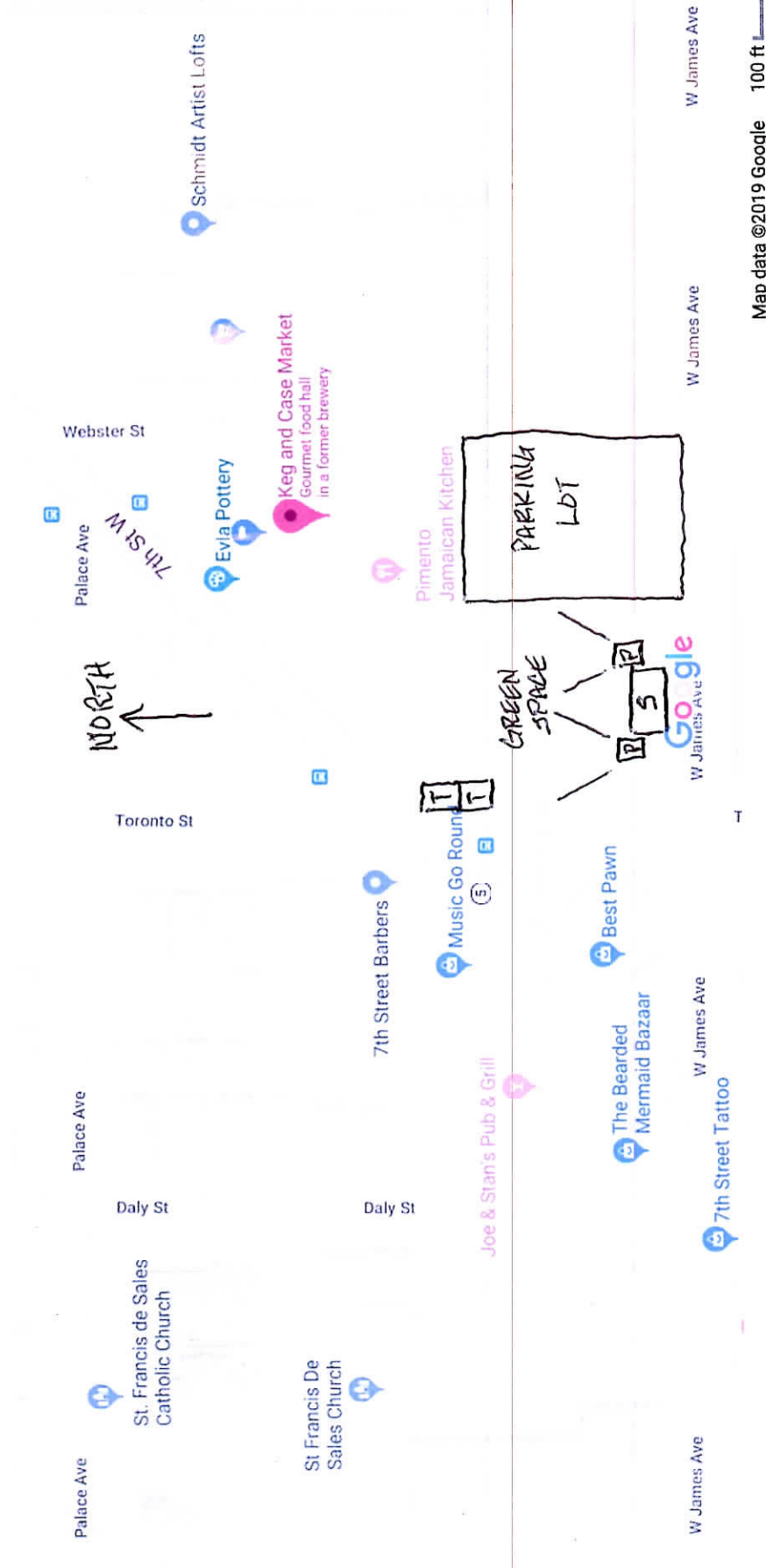
Caleb Garn

AA-ADA-BEO Employer

Date: _____

7-29-19

Google Maps Keg and Case Market



- T = TENTS
- P = PA SYSTEM & DIRECTION
- S = STAGE



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: 07/29/2019

Received From: FIVE WATT COFFEE
928 7TH ST W ST PAUL MN 55102

Description:

Invoice Details

1059546

Noise Variance

TOTAL AMOUNT PAID:

Invoice Amount

Amount Paid

\$172.00

\$172.00

\$172.00

Paid By:

Payment Type	Check #	Received Date	Amount
Check	1092	07/29/2019	\$172.00