

CITY OF SAINT PAUL

Received Business Licensing

375 Jackson Street, Suite 220 Saint Paul, Minnesota 55101-1806 Telephone: 651-266-8989 Facsimile: 651-266-9124 Web: www.stpaul.gov/dsi

XU

JAN 0 6 2025

City of Saint Paul - DSI

Sound Level Variance Application

Legislative Code Chapter 293. - Noise Regulations

Application and \$175 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.

. Procedure to the council's agenda.
1. Organization/person seeking variance: Buriew Moe's
2. Event Name: St Patricks Day / Lucky Dalaca
5. Address and physical description of noise source location (Front Western L.
242 West 1th Street of Paul MN 55102 (Burger Moe's)
Title: MALA
5. Telephone: (051-402 - 9244 F-Mail: 10-0-0-1
6. Date(s) variance requested: 3(15/25 4 3/17/25 NOON-11 pm com
7. Noise source - Time(s) of operation: 100 0.0
- Time(s) of pre-event sound check: NOON
9. Mailing address w/zip code: 242 11) oct 7th Shoret 6+0
10. Briefly describe the noise source and equipment involved: DT with speakers
Speakers
11. Describe the steps that will be taken to minimize the noise levels:
The most revers.
12. State reason for seeking variance (example - music, announcements, construction, etc.):
music
13. A <u>site diagram & map</u> 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 \$175.00 fee to:
CITY OF SAINT PAUL
DEPARTMENT OF SAFETY AND INSPECTIONS
375 JACKSON STREET, SUITE 220 SAINT PAUL, MN 55101-1806
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Signature of responsible person: $\frac{1}{5/25}$

AA-ADA-EEO Employer



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: 01/06/2025

Received From: BURGER MOE'S INC

242 7TH ST W ST PAUL MN 55102

Description:

Invoice Details

Invoice Amount

Amount Paid

1174322

Noise Variance

\$178.00

\$178.00

TOTAL AMOUNT PAID:

\$178.00

Paid By:

Payment Type	Check #	Received Date	Amount
Credit Card	V5528	01/06/2025	\$178.00