



CITY OF SAINT PAUL

APR 1 8 2022

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

City of Saint Paul - DSA Sound Level Variance Application

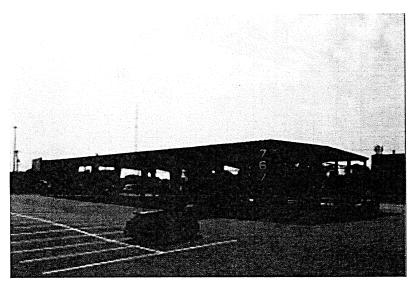
Legislative Code Chapter 293. - Noise Regulations

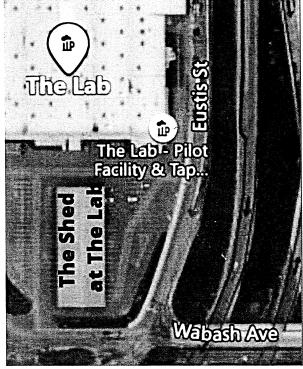
Application and \$175 fee should be submitted a minimum of sixty (60) days prior to the event date to allow ample time for required public notification period and scheduling of a Council public hearing. Applications submitted within sixty (60) days of the event date may not satisfy the processing timeline requirements.

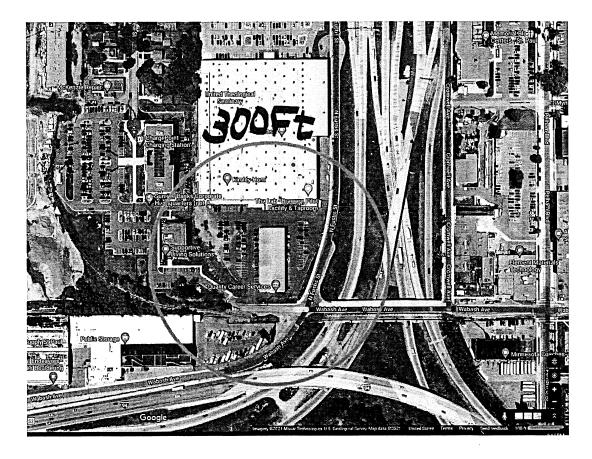
1. Organization/person seeking variance: The Lab LLC BIKEMS TWIN CITIES
2. Event Name: BIKE MS TWIN CITIES
3. Address and physical description of noise source location (Event, Worksite): The Shede The Lab
Event 767 N. Enstis Street Ste 115 St. Paul, MN 55/14
4. Responsible person: LAWEN BEV TVAMA Title: (ALNEW MANAGE)
5. Telephone: USI-313. 6889 E-Mail: bertrand @, the labmn. com
6. Date(s) variance requested: SWACAY MAY 15, 2022
7. Noise source - Time(s) of operation: $\frac{8:000-5:000}{1}$
- Time(s) of pre-event sound check: NA
8. Sound level requested (dBA/Decibels): DUIDOS
9. Mailing address w/zip code: 161 N EUSTIS St. Ste 115 St. Paul, MN 55114
10. Briefly describe the noise source and equipment involved:
and Music, DI tower speakers
11. Describe the steps that will be taken to minimize the noise levels: balanced Mowitored
amplification and deubel reader on-site'
12. State reason for seeking variance (example - music, announcements, construction, etc.):
music and any ounce ments for vace
13. Maximum number of attendees: \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \
14. Describe steps that will be taken to prevent COVID-19 virus spread:
on-line check-in.
15. 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.
16. 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
I understand that any social gathering associated with this variance must be managed in full compliance
with all applicable Governor Walz COVID-19 orders relating to distancing, masks and attendance limits.
10 mm
Signature of responsible person: Will Will Date: 418 1016



The Shed at The Lab:









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: 04/22/2022

Received From: THE LAB LLC

767 EUSTIS ST STE 115 ST PAUL MN 55114

Description:

Invoice Details

Invoice Amount

Amount Paid

1125167

Noise Variance

\$534.00

\$534.00

TOTAL AMOUNT PAID:

\$534.00

Paid By:

Payment Type	Check #	Received Date	Amount
Credit Card	MC3267	04/22/2022	\$534.00