



AUG 14 2024

375 Jackson Street, Suite 220

Saint Paul, MN 55101-1806

Tel: 651-266-8989 | Fax: 651-266-9124

City of Saint Paul - DSI

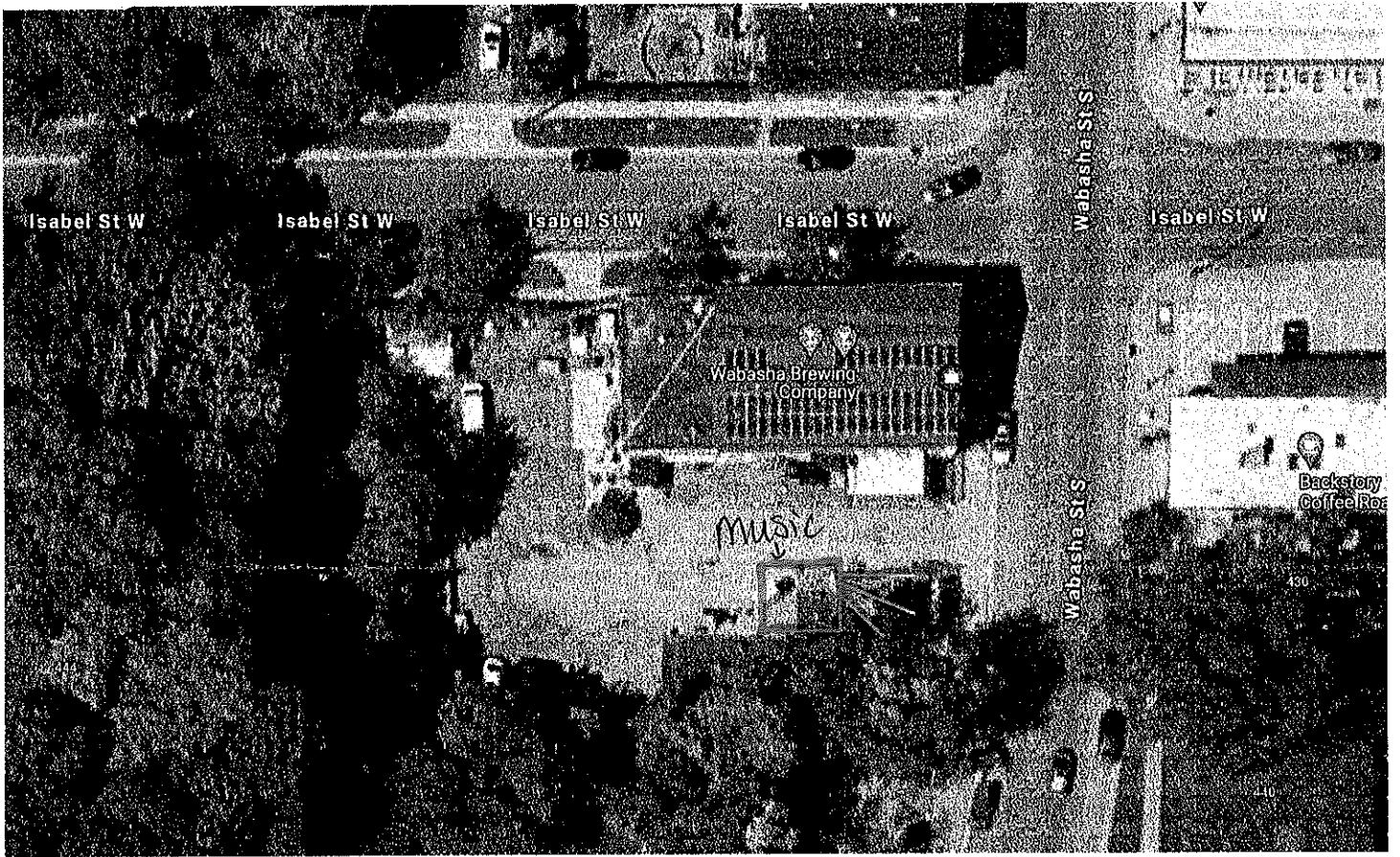
### Sound Level Variance Application

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: Wabasha Brewing Co.
2. Event Name: Music at Wabasha
3. Address and physical description of noise source location (Event, Worksite): patio space  
429 Wabasha St. S St. Paul mn
4. Responsible person: Deanna Vastine Title: Events Coordinator
5. Telephone: 763-245-7293 E-Mail: info@wabashabrewing.com
6. Date(s) variance requested: October 5, 12, 19, 26
7. Noise source - Time(s) of operation: 2-8pm - potential time for scheduling w/ breaks in between  
- Time(s) of pre-event sound check: 1:30pm
8. Sound level requested (dBA/Decibels): 90 decibels
9. Mailing address w/zip code: 429 Wabasha St. S St. Paul, mn 55107
10. Briefly describe the noise source and equipment involved: live music, acoustic with  
microphone and speaker, 1-3 person groups
11. Describe the steps that will be taken to minimize the noise levels: speaker facing away from  
neighborhood, sound checks and performance monitoring
12. State reason for seeking variance (example - music, announcements, construction, etc.):  
live music
13. Maximum number of attendees: 100
14. 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.**
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: Deanna Vastine Date: 8.8.24





# DSI RECEIPT

CITY OF SAINT PAUL  
Department of Safety and Inspections  
375 Jackson Street Suite 220  
Saint Paul, Minnesota 55101-1806  
Phone: (651) 266-8989 Fax: (651) 266-9124  
www.stpaul.gov/dsi

Date: 08/21/2024

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

Description:

Invoice Details

1164073

Noise Variance

Invoice Amount

\$178.00

Amount Paid

\$178.00

**TOTAL AMOUNT PAID:**

**\$178.00**

Paid By:

Payment Type	Check #	Received Date	Amount
Check	2836	08/21/2024	\$178.00