



SAINT PAUL
SAFETY & INSPECTIONS

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ST. PAUL, MINNESOTA 55101-1806
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Visit our website at www.stpaul.gov/dsi

DSI STAFF USE ONLY

File number: _____
Date Received: 7/23/2025
Fee attached: _____

SKYWAY ORDINANCE 140.10
Exception to General Hours of Operation Application

This application must be filled out completely. An application fee of \$110.00 must be attached. In addition to describing specific reasons for requesting an exception to the general hours of operation, please attach any supporting information you feel should be considered in granting this exception.

****Incomplete applications will be returned.****

1. Reason for request (Attach additional sheet if necessary)

We're looking to close the doors to the Degree of Honor Building which are attached to the common area beyond Skyway 33.

We're not looking to directly change Skyway 33's hours of operation but instead close the doors to the apartment building which are currently being operated under skyway hour requirements. Additional exhibits attached with the application

2. Skyway to be considered for exception to general hours of operation

City skyway number: 33 Crosses over street: 4th St E

Building names and addresses on each side of the skyway:

1. Degree of Honor / 325 Cedar St, St. Paul, MN 55101

2. Press House Apartments

Proposed alternate hours of operation: Closed and secured 24 hours a day, 7 days a week. Can be accessed with a fob or key

3. APPLICANT INFORMATION

Name of contact person: Hunter Bradford

Building or company name: Degree of Honor

Street and number: 325 Cedar St

City: St. Paul State: MN Zip Code: 55101

Phone number: [REDACTED] E-mail: [REDACTED]

4. PROPERTY OWNER(S) INFORMATION (Complete only if different from applicant)

Name: [REDACTED]

5. ATTACHMENTS

Please include the filing fee of \$110.00, and all supporting documents required for consideration.

6. APPROVAL/DENIAL

An exception to general hours of operation for skyways may be granted if, after review by the Department of Safety and Inspections, the Skyway Governance Advisory Committee and the Saint Paul City Council, it is found that the information submitted is sufficient to warrant an exception.

I have read the skyway hours of operation requirements in Section 140.10. of the Saint Paul Legislative Code and understand that the property must remain in compliance with the ordinance's general hours until an exception to general hours of operation is approved by the City Council.

Signature of applicant: _____

Date: 7/23/2025

Signature of owner (if different) _____

Date: 7/23/2025

FOR DSI OFFICE USE ONLY

Date received at DSI: 7/23/2025 City Staff: Luis Sanchez-Panadero

Date submitted to Skyway Governance Advisory Committee: 7/25/2025 by LSP
(Must be received at the City Council within thirty (30) days of this date.)

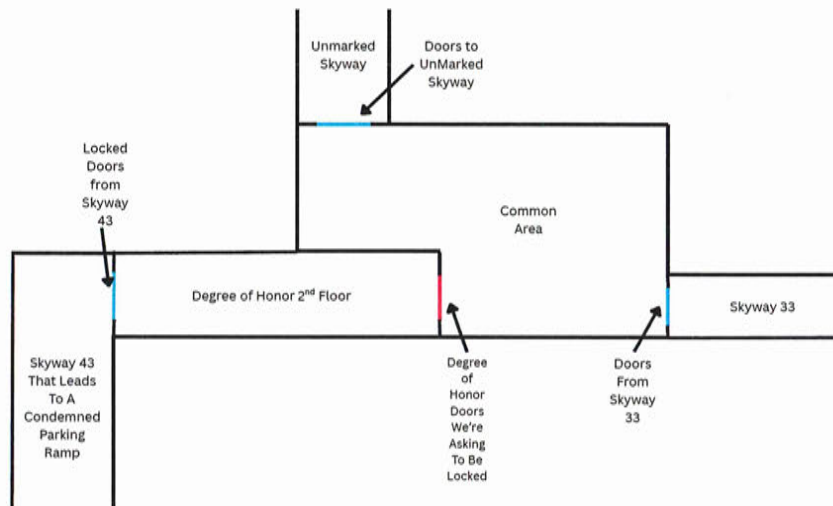
Date received at City Council: _____ by _____

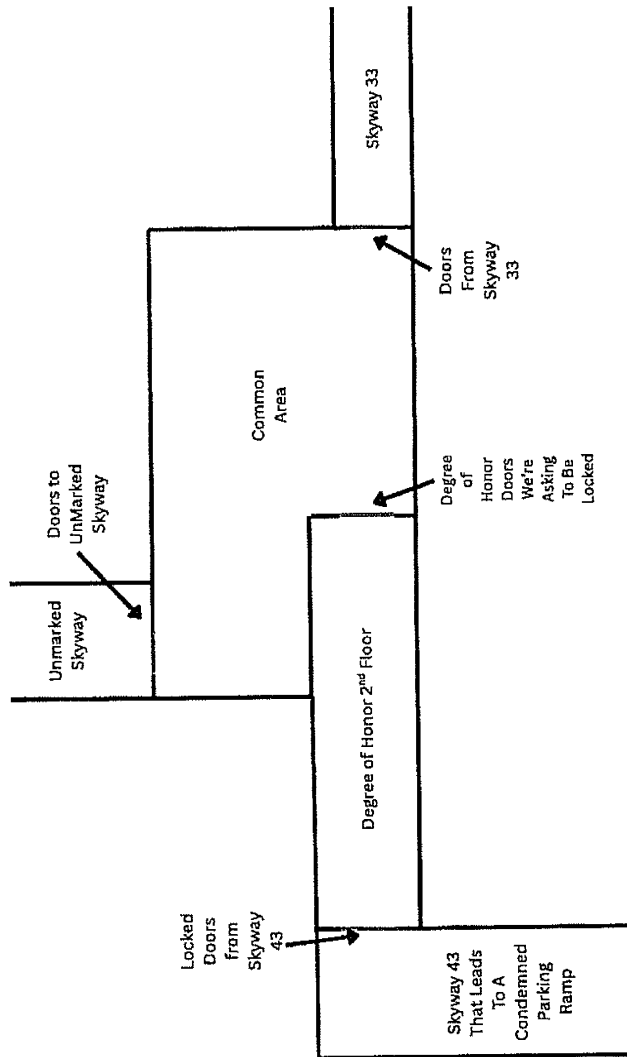
Tentative Hearing Date: _____

Approval: Yes or No Resolution Date: _____

Alternate hours posted within five (5) feet of all entrances to # _____ skyway as required.

Confirmation of signage date: _____ by Inspector: _____





A photograph of an office hallway. The floor is covered in a dark, patterned carpet. A red outline highlights a doorway on the left side of the hallway. The ceiling is white with recessed lighting. The walls are light-colored. The text "Private Apartments" is written in red in the upper left area of the image.

Private Apartments

Common Area