



CITY OF
BLOOMINGTON
MINNESOTA

Development Application

Case no. **PL202100129****PL2021-129**

Type of application

- ☐ Standard
 ☐ Staff approval
 ☐ Hearing Examiner
 ☐ Plan Revision
 ☐ Amended
 ☐ Reapplication
- ☐ Rezoning
 ☐ Conditional Use Permit
 ☐ Variance
 ☐ Ordinance Amendment
- ☐ Preliminary Development Plan
 ☐ Interim Use Permit
 ☐ Comprehensive Plan Amendment
 ☐ Subdivision
- ☐ Final Development Plan
 ☐ Final Site and Building Plan
 ☒ Other Amend Condition; Extend Plat and Development Plan

Site location ☐ Additional addresses on back ☐ Legal description attached

Property address
3700 American Boulevard East

Common name

Business address

PIN
06-027-23-21-0012

Lot
001

Block
001

Plat name
International Airport Park 5th Addition

Proposal Full documentation must accompany application

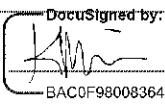
See Attached

Complete all applicable sections — Select only ONE person as primary contact

Fee property owner

☐ Primary contact ☐ Additional owners on Back	Owner name per property title		E-mail	
	Mailing address		City	State Zip
	Business address		City	State Zip
	Daytime phone	Cell phone	FAX	
	Typed/printed name Signature Title			

User/occupant

☐ Primary contact	Business name/name Rosa Development Company, LLP		E-mail	
	Mailing address 334 NE 1st Avenue		City Del Ray Beach	State Zip FL 33444
	Business address Same		City Same	State Zip Same Same
	Daytime phone 561-392-7777	Cell phone	FAX 561-392-9900	
	Kristin Muir  Ceo Typed/printed name BAC0F98008364 Signature Title			

NOTE: Applications only accepted with ALL required support documents. See Instructions.

Deadline for agency action

60 Days: _____ 120 Days: _____

Planner: _____ DRC: _____

Shaded areas are for office use only

Received:	Date	By
Reviewed:	Date	By ☐ PC ☐ CC ☐ HE
Fee paid:	Date	\$
☐ Admin. approval:	Date	By
		☐ Comm. Dev't Dir. ☐ Planning Div. Manager
		☐ Other _____

Community Development

Planning and Economic Dev.
1800 W. Old Shakopee Road
Bloomington MN 55431-3027

PH 952-563-8920
FAX 952-563-8949
TTY 952-563-8740

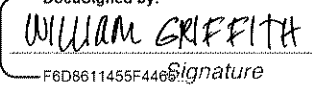
E-MAIL planning@ci.bloomington.mn.us
www.ci.bloomington.mn.us

Page 2 of _____

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Additional parties					
☐ Primary contact	Business name/name Larkin Hoffman / William C. Griffith			E-mail wgriffith@larkinhoffman.com	
	Mailing address 8300 Norman Center Drive, Suite 1000		City Minneapolis	State MN	Zip 55437
	Business address Same		City Same	State Same	Zip Same
	Daytime phone 952-896-3290	Cell phone 612-986-7711	FAX 952-842-1738		
	William C. Griffith <i>Typed/printed name</i>		 <i>Signature</i>		Attorney <i>Title</i>

Additional fee property owners and addresses				
Business name/name			E-mail	
Mailing address		City	State	Zip
Business address		City	State	Zip
Daytime phone	Cell phone	FAX		
<i>Typed/printed name</i>		<i>Signature</i>		<i>Title</i>
Business name/name			E-mail	
Mailing address		City	State	Zip
Business address		City	State	Zip
Daytime phone	Cell phone	FAX		
<i>Typed/printed name</i>		<i>Signature</i>		<i>Title</i>
Business name/name			E-mail	
Mailing address		City	State	Zip
Business address		City	State	Zip
Daytime phone	Cell phone	FAX		
<i>Typed/printed name</i>		<i>Signature</i>		<i>Title</i>

Use additional sheets or copy form for additional properties