



# Development Application

Case no.

CASE #PL2022-31

**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 Change in Condition

**Site location**   ☐ Additional addresses on back   ☐ Legal description attached

Property address  
4217 American Blvd West, Bloomington, Minnesota

Common name

Business address  
7700 France Avenue South, Suite 410N, Edina, Minnesota

PIN   Lot   Block   Plat name  
PA Walser 2nd Addition, Hennepin County, Minnesota

**Proposal** Full documentation must accompany application**Complete all applicable sections — Select only ONE person as primary contact****Fee property owner**

|                                                            |                                                             |  |                            |                                             |              |
|------------------------------------------------------------|-------------------------------------------------------------|--|----------------------------|---------------------------------------------|--------------|
| <input checked="" type="checkbox"/> <b>Primary contact</b> | Owner name per property title<br>Walser Real Estate IV, LLC |  | E-mail<br>legal@walser.com |                                             |              |
| <input type="checkbox"/> <b>Additional owners on Back</b>  | Mailing address<br>7700 France Ave S., #410N                |  | City<br>Edina              | State<br>MN                                 | Zip<br>55435 |
|                                                            | Business address                                            |  | City                       | State                                       | Zip          |
|                                                            | Daytime phone<br>952-653-3575                               |  | Cell phone<br>612-382-0376 | FAX                                         |              |
|                                                            | John R. Brennan<br><i>Typed/printed name</i>                |  | <br><i>Signature</i>       | Senior VP, Legal/Accounting<br><i>Title</i> |              |

**User/occupant**

|                                                 |                           |  |                  |       |              |
|-------------------------------------------------|---------------------------|--|------------------|-------|--------------|
| <input type="checkbox"/> <b>Primary contact</b> | 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> |

**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**

|                                                  |                                                                                          |                                                                                        |
|--------------------------------------------------|------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| <b>Received:</b>                                 | Date                                                                                     | By                                                                                     |
| <b>Reviewed:</b>                                 | Date                                                                                     | By <input type="checkbox"/> PC <input type="checkbox"/> CC <input type="checkbox"/> HE |
| <b>Fee paid:</b>                                 | Date                                                                                     | \$                                                                                     |
| <input type="checkbox"/> <b>Admin. approval:</b> | Date                                                                                     | By                                                                                     |
|                                                  | <input type="checkbox"/> Comm. Dev't Dir. <input type="checkbox"/> Planning Div. Manager |                                                                                        |
|                                                  | <input type="checkbox"/> Other _____                                                     |                                                                                        |

Community Development

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