



Development Application

Case no. PL2018-93

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 _____

Site location ■ Additional addresses on back ■ Legal description attached

Property address _____ Common name _____
 See multiple addresses (4) on attached subject property sheet Hyatt House Hotel (proposed)

Business address _____

PIN _____ Lot _____ Block _____ Plat name _____

Proposal Full documentation must accompany application

See attached documentation

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

Fee property owner

<input checked="" type="checkbox"/> Primary contact	Owner name per property title Metropolitan Airports Commission		E-mail eric.johnson@mshpmac.org	
	Mailing address 6040 28th Avenue South	City Minneapolis	State MN	Zip 55450
<input checked="" type="checkbox"/> Additional owners on Back	Business address		State	Zip
	Daytime phone 612725-8322	Cell phone 612-919-0325	FAX	
Eric L. Johnson				Director, CMAA
Typed/printed name		Signature		Title

User/occupant

<input checked="" type="checkbox"/> Primary contact	Business name/name Dark Horse Hospitality LLC		E-mail	
	Mailing address 814 American Blvd E	City Bloomington	State MN	Zip 55420
	Business address 2706 James St		State IA	Zip 52241
	Daytime phone	Cell phone 612-310-9799	FAX	
				Managing Partner
Typed/printed name		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 <input type="checkbox"/> PC <input type="checkbox"/> CC <input type="checkbox"/> HE
Fee paid:	Date	\$
<input type="checkbox"/> Admin. approval:	Date	By
	<input type="checkbox"/> Comm. Dev't Dir. <input type="checkbox"/> Planning Div. Manager	
<input type="checkbox"/> 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

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Additional parties					
<input checked="" type="checkbox"/> Primary contact	Business name/name Sambatek/ Chad Ayers			E-mail cayers@sambatek.com	
	Mailing address 12800 Whitewater Drive		City Minnetonka	State MN	Zip 55343
	Business address		City	State	Zip
	Daytime phone 763-259-6697	Cell phone	FAX		
	Chad Ayers <i>Typed/printed name</i>			Project Manager <i>Signature</i> Title	

Additional fee property owners and addresses				
Business name/name <i>Skylark Technology Foundry Inc.</i>			E-mail <i>bart.zibrowski@skylarktechnology.com</i>	
Mailing address <i>2401 E. 86th St.</i>		City <i>Bloomington</i>	State <i>Mn</i>	Zip <i>55425</i>
Business address <i>Same</i>		City	State	Zip
Daytime phone <i>952-851-5200</i>	Cell phone <i>612-581-5459</i>	FAX		
<i>Bart L. Zibrowski</i> <i>Typed/printed name</i>			<i>[Signature]</i> <i>Signature</i> Title <i>Vice Chairman</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> Title	
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> Title	

Use additional sheets or copy form for additional properties