



CITY OF
BLOOMINGTON
MINNESOTA

Development Application

Case no. **CASE FILE #PL201800252**

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 **ROOFTOP TELECOM ATTACHMENT**

Site location ■ Additional addresses on back ■ Legal description attached

Property address
3200 E 81ST STREET / BLOOMINGTON, MN 55425

Common name
HYATT REGENCY

Business address
SAC WIRELESS (o/b/o SAC Wireless) / 540 W MADISON STREET, 16TH FLOOR / CHICAGO, IL 60661

PIN
0602723230645

Lot
001

Block
001

Plat name

Proposal Full documentation must accompany application

INSTALL AN AT&T C-RAN TELECOMMUNICATIONS FACILITY, WITH ASSOCIATED EQUIPMENT
AND CABLING TO ROOFTOP OF EXISTING BUILDING, AS PER PLANS

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

Fee property owner

<input type="checkbox"/> Primary contact	Owner name per property title <i>Bloomington Central Station Hotel, LLC</i> BLMGTN CENTRAL STATION HOTEL (HYATT REGENCY)		E-mail <i>m.fabel@mcgough.com</i>	
<input type="checkbox"/> Additional owners on Back	Mailing address 2737 FAIRVIEW AVE N	City ST. PAUL	State MN	Zip 55113
	Business address 2737 FAIRVIEW AVE N	City ST. PAUL	State MN	Zip 55113
	Daytime phone	Cell phone <i>651-633-5050</i>	FAX	
	<i>Mark Fabel</i> Typed/printed name		<i>MA FM</i> Signature	
			<i>Ex VP Dev't</i> Title	

User/occupant

<input checked="" type="checkbox"/> Primary contact	Business name/name SAC WIRELESS (o/b/o AT&T MOBILITY)		E-mail ANDREW.MCHUGH@SACW.COM	
	Mailing address 540 W MADISON STREET, 16TH FLOOR	City CHICAGO	State IL	Zip 60661
	Business address 540 W MADISON STREET, 16TH FLOOR	City CHICAGO	State IL	Zip 60661
	Daytime phone	Cell phone (630) 379-8945	FAX	
	<i>ANDREW MCHUGH</i> Typed/printed name		<i>Andrew McHugh</i> Signature	
			<i>C-RAN SUBLEAD</i> 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

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