



CITY OF
BLOOMINGTON
MINNESOTA

Development Application

Case no. 8201800292 CASE FILE #PL201800292

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 Upgrade on existing tower

Site location ■ Additional addresses on back ■ Legal description attached

Property address
8801 Lyndale Avenue South

Common name

Business address

PIN
10-027-24-23-0009

Lot Block

Plat name

Proposal Full documentation must accompany application

Sprint New Colo:

Final: (3) ANTENNA, (3) ANTENNA W/INTEGRATED RADIO; (3) HYBRID LINES; (6) RRU'S

8X8 LEASE AREA; 8X8 PAD; (2) CABINETS

MOUNT- P10-PV-LPP- PLATFORM W/HANDRAIL

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

Fee property owner

<input type="checkbox"/> Primary contact	Owner name per property title <u>Independent School District #271 - Bloomington School</u>		E-mail <u>jhazel@isd271.org</u>	
	Mailing address <u>8801 Lyndale Ave. So.</u>	City <u>Bloomington</u>	State <u>MN</u>	Zip <u>55420</u>
<input type="checkbox"/> Additional owners on Back	Business address <u>1350 W. 106th St.</u>	City <u>Bloomington</u>	State <u>MN</u>	Zip <u>55431</u>
	Daytime phone <u>952-681-6421</u>	Cell phone <u>952-681-6421</u>	FAX <u>952-681-6435</u>	
Typed/printed name <u>Rad Y. Zivkovich</u>		Signature <u>Kelly F. L. 9.5.18</u>		Title <u>Executive Director Finance and Support Svcs</u>

User/occupant

<input checked="" type="checkbox"/> Primary contact	Business name/name Crown Castle		E-mail braden.bordo@crowncastle.com	
	Mailing address 2000 Corporate Drive	City Canonsburg	State PA	Zip 15317
	Business address	City	State	Zip
	Daytime phone 724-743-7752	Cell phone 412-780-5157	FAX	
Typed/printed name Braden Bordo		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

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