



Development Application

Case no.

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 Airport Zoning Permit

Site location ■ Additional addresses on back ■ Legal description attached

Property address 8041 / 8051 33rd Avenue South		Common name Bloomington Central Station	
Business address Bloomington, MN 55425			
PIN 06-027-23-23-0638/0648	Lot Lot 1	Block Block 1	Plat name Bloomington Central Station 6th Addition

Proposal Full documentation must accompany application

Minor Revision to the Preliminary Development Plan, Final Development Plan Approval, and an Airport Zoning Permit Approval for a 402-unit multifamily residential and retail development at Bloomington Central Station.

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

Fee property owner

<input checked="" type="checkbox"/> Primary contact <input type="checkbox"/> Additional owners on Back	Owner name per property title Bloomington Central Station, LLC		E-mail david.higgins@mcgough.com	
	Mailing address 2737 Fairview Avenue North	City St. Paul	State MN	Zip 55113
	Business address	City	State	Zip
	Daytime phone (651) 634-7764	Cell phone (617) 510-0429	FAX (651) 633-5673	
	David Higgins <i>Typed/printed name</i>		 <i>Signature</i>	

VP-Development
Title

User/occupant

<input type="checkbox"/> Primary contact	Business name/name		E-mail	
	Mailing address	City	State	Zip
	Business address	City	State	Zip
	Daytime phone	Cell phone	FAX	

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

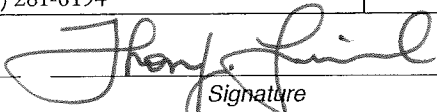
PH 952-563-8920
FAX 952-563-8949
TTY 952-563-8740

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

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Additional parties					
<input type="checkbox"/> Primary contact	Business name/name Kimley-Horn and Associates, Inc.			E-mail tom.lincoln@kimley-horn.com	
	Mailing address 2550 University Avenue West		City St. Paul	State MN	Zip 55114
	Business address		City	State	Zip
	Daytime phone (651) 643-0453	Cell phone (612) 281-6194	FAX		
	Thomas J. Lincoln <i>Typed/printed name</i>		 <i>Signature</i>		Sr. Project Manager <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