

## **Development Application**

Case no. CASE FILE #PL201900028

164		Туре	of application	i) i	Carry Contract		11111	1,777		
Standard	I Staff approval	Hearing Examiner	☐ Plan Rev	ision [	Amende	d 🔲	Reapplicat	ion		
	ary Development Plan velopment Plan	Conditional Use Permit Interim Use Permit Final Site and Building P	Plan 🗌 Other _	chensive P	lan Amendr	nent [	☐ Ordinand ☐ Subdivis	ce Ameno ion	ment	
Drog order a de	Site locat	ion 🔳 Additional addi	resses on back	Legal o	lescription	attached				
Property add 8100 Highwo	iress od Drive, Bloomington, Mi	7			n name	121				
Business add		The state of the s		Litterios	hip Village	DIOOHH	igion			
Same as abov	e									
PIN Multiple PIN:	2	Lot	Block	Plat nar						
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	40040									
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44.00	Complete al	l applicable sections	— Select only Ol	NE person	as primary	contact				
Mark Contract			operty owner	1000-600						
Primary	Owner name per prope					E-mail		Bull March Marie South	E.C. Madaddig	
contact	Mailing address	s, Inc. d/b/a Friendship V	· · · · · · · · · · · · · · · · · · ·	gton			th@lifespa	ecommu	inities.c	
Additional	1/201 Composite Daire				City West Des Moines			State Zip IA 50266		
Owners	Business address				City			State Zip		
on Back	Same as above									
	Daytime phone 515-309-4458	Cell pho	one		FAX	15 000 00			er	
	313-309-4436		- AAAM		1 3	15-288-59	111	***************************************		
	Larry Smith		- Janes	m. X		Chi	ief Financia	ıl Officer		
	Typed/p	rinted name		Signature			Titl	9		
7.5		user	/occupant							
Primary	Business name/name	a				E-mail				
contact	Friendship Village of B Mailing address	toomington	City			Ctoto	7 in	-		
	8100 Highwood Drive		Bloomingto	11		State MN	Zip 55438			
	Business address		City			State	Zip			
	Same as above  Daytime phone									
	952-831-7500	Cell pho	ne		FAX					
		water and the same			1 1	Λ				
	Larry Smith		**************************************	m. 3	K_D	<u></u>	hief Finanç	ial Office	er	
		rinted name		Signature			Title	<i>}</i>		
NOTE: Appl	ications only accepted wi documents. See Instr	th ALL required support		Shaded .	areas are f	or office	use only		income more consider.	
			Received:	Date	E	Ву				
Deadline for agency action			Reviewed:	Date	ate By PC CC THE					
60 Days:	ys: 120 Days			Date	\$			~		
Planner	DRC	□ Admin. - approval:	Date	Ву						
			Approvat.	□ Comm	Comm. Dev't Dir.   Planning Div. Manager				r	
	Administration of the state of	W. W		☐ Other						
Community	1800	ning and Economic Dev. W. Old Shakopec Road	FAX 952-5	63-8920 63-8949	E-MAIL pla www.ci.blo			ton.mn.u	S	
	Rioot	nington MN 55431-3027	TTY 952-5	63-8740			web_52_001 pg	of(07/0	9)	

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

	A Section of the Control of the Cont	Additional	parties		, , , , , , , , , , , , , , , , , , , ,				
Primary contact	Business name/name SAS Architects & Planners, LLC		E-mail moyer@sasarch.com						
	Mailing address		City		State	Zip			
	630 Dundee Road, Suite 110		Northbrook		IL State	60062			
	Business address		Dity			Zip			
	Same as above								
	Daytime phone 847-563-8333 x250	Cell phone 847-331-4329			X 847-564-9989				
	James T. Moyer	Jan 1.1	.///aw Vice President						
	Typed/printed name	Signature			Title				
	Additional f	ee property o	wners and addre	2922		Walter 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			
	Business name/name		E-mail						
	Mailing address	C	Dity		State	Zip			
	Business address	C	City		State	Zip			
	Daytime phone	Cell phone		FAX 847-564-9989					
	Typed/printed name	Signature	ıre Title						
	Business name/name				E-mail				
	Mailing address		City		State	Zip			
	Business address	С	City		State	Zip			
	Daytime phone Cell pho		ne FAX		Χ'				
	Typed/printed name		Signature		Title				
	Business name/name				E-mail				
	Mailing address		City		State	Zip			
	Business address		City		State	Zip			
	Daytime phone Cell phone		FAX						

Use additional sheets or copy form for additional properties