

Development Application

web_52_001 pg1 of __ (07/09)

Case no.

CASE FILE #PL201900040

			Type of a	oplication					
✓ Standard	☐ Staff approval	☐ Hearing Ex	aminer	Plan Revisio	on 🔽 A	mended	Rea	application	
✓ Rezoning □ Conditional Use Permit ✓ Preliminary Development Plan □ Interim Use Permit ✓ Final Development Plan □ Final Site and Building Plan			✓ Variance ☐ Ordinance Amendment ☐ Comprehensive Plan Amendment ☐ Subdivision ✓ Other Platting Variance						
	Site loca	a tion 🔳 Addition	nal addresse	s on back	Legal desc	ription a	ittached		
Property address 1951 American B	Common name Knox Ave S Knox & American								
Business addres Bloomington, MI	· -				***				
PIN Lot 1 & 2				Block Plat name Hays Penn Ave 2nd and 6th Addition					
0402724230022 0	-			on must accon	1		and our red		
See included m	nemo.		HTMM-MAN-79999 MARKET BEFORE BEFORE						
		WWW.AmmaMinn							
	Complete	all applicable se	ctions — S	elect only ON	E person as	primary	contact		
	101111011111111111111111111111111111111		Fee prope	rty owner					
Primary contact	Owner name per property title Knox & American I LLC						E-mail rdunlay@stuartco.com		
✓ Additional owners on Back	Mailing address 1000 W 80th St			City Minneapolis			State Zip MN 55420		
	Business address			City			State Zip		
	Daytime phone 952-948-9546		Δ	FAX					
	Ryan Dunlay			Organ Juney President					
	Typed/printed name				Signature			Title	
Primary contact	Business name/nar	me	User/o	ccupant			E-mail		
	Mailing address			City			State	Zip	
	Business address			City			State	Zip	
	Daytime phone Cell phone			FAX					
	Type	ed/printed name	OLINOCOSCA III III III III III III III III III I		Signature				
NOTE: Applications only accepted with ALL required support			Shaded areas are for office use only						
	documents. See I	nstructions.		Received:	Date	·	Ву		
	Deadline for age	ency action		Reviewed:	Date		Ву □РС	□CC □HE	
60 Days: 120 Days			Fee paid:	Date		\$			
Planner				☐ Admin. Date			Ву		
***************************************				approval:	☐ Comm.	Dev't Di	r. 🗆 Pla	anning Div. Manager	
Community	•	Planning and Econo 1800 W. Old Shakop Bloomington MN 5	pee Road	FAX 952-5	63-8920	E-MAIL p www.ci.b	loomington	i.bloomington.mn.us .mn.us	

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

Additional parties												
Primary	Business name/name		E-mail									
contact	HRA City of Bloomington		dgrout@bloomingtonmn.gov									
	Mailing address	City		State	Zip							
	Bloomington HRA 1800 W Old Shakopee Rd		Bloomington		MN	55431						
	Business address	ļ	City		State	Zip						
	Daytime phone	Cell phone	$\sim \lambda \Lambda$	FAX								
	952-563-8940 Doug Grout Administrator											
	Typed/printed name		Title									
	Additional fee	property	owners and addresse	S								
	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 E-mail								
	Business name/name											
	Mailing address	City		State	Zip							
	Business address	usiness address			State	Zip						
	Daytime phone	Cell phone										
	Typed/printed name	Signature	Title									
	Business name/name			E-mail								
	Mailing address		City		State	Zip						
	Business address		City		State	Zip						
	Daytime phone		FAX									
		wew.	ramennamennav Spenime	SECONTINUE THE THE THE SECOND								
	Typed/printed name	Signature	Title									
	Use additional she	ets or conv	form for additional prop	erties	3							
	TO GO											