



CITY OF  
**BLOOMINGTON**  
MINNESOTA

# 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 \_\_\_\_\_

## Site location ■ Additional addresses on back ■ Legal description attached

Property address  
6205 W 111th St, Bloomington, MN 55438

Common name \_\_\_\_\_

Business address \_\_\_\_\_

PIN  
0511521110004

Lot \_\_\_\_\_ Block \_\_\_\_\_

Plat name  
NESBITT INDUSTRIAL PARK

## Proposal Full documentation must accompany application

Best Buy is seeking to add/reorient parking areas and improve access to serve modified building program

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

### Fee property owner

<input type="checkbox"/> <b>Primary contact</b>  <input type="checkbox"/> <b>Additional owners on Back</b>	Owner name per property title First Industrial LP		E-mail jschlundt@firstindustrial.com	
	Mailing address 10140 West 76th St	City Eden Prairie	State MN	Zip 55344
	Business address	City	State	Zip
	Daytime phone 952-852-7171	Cell phone	FAX	
	Jim Schlundt <i>Typed/printed name</i>		Regional Manager <i>Title</i>	

DocuSigned by:  
  
 8168EA69D0224E9 Signature

### User/occupant

<input checked="" type="checkbox"/> <b>Primary contact</b>	Business name/name Best Buy		E-mail brendon.stuckey@bestbuy.com	
	Mailing address 7601 Penn Ave. S	City Richfield	State MN	Zip 55423
	Business address	City	State	Zip
	Daytime phone 612-291-7541	Cell phone 612-804-6524	FAX	
	Brendon Stuckey <i>Typed/printed name</i>		Sr. Development Manager <i>Title</i>	

Signature

**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

<b>Received:</b>	Date	By
<b>Reviewed:</b>	Date	By <input type="checkbox"/> PC <input type="checkbox"/> CC <input type="checkbox"/> HE
<b>Fee paid:</b>	Date	\$
<input type="checkbox"/> <b>Admin. approval:</b>	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

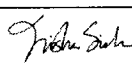
E-MAIL [planning@ci.bloomington.mn.us](mailto:planning@ci.bloomington.mn.us)  
[www.ci.bloomington.mn.us](http://www.ci.bloomington.mn.us)

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**Development Application**

Case no. \_\_\_\_\_

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

<input checked="" type="checkbox"/> <b>Primary contact</b>	Business name/name Kimley-Horn		E-mail trish.sieh@kimley-horn.com	
	Mailing address 767 Eustis St, Suite 100	City St. Paul	State MN	Zip 55114
	Business address	City	State	Zip
	Daytime phone	Cell phone	FAX	
	Trish Sieh <i>Typed/printed name</i>		 <i>Signature</i>	
			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**