

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
5601 American Blvd W, Bloomington, MN 55437

Common name

Business address

PIN
1611621230005

Lot
001

Block
001

Plat name
Jostens Addn

Proposal Full documentation must accompany application

Modification to previously approved FDP. Reduction of units from 148 to 133, thus a reduction to the total required parking stalls. Change of 9 site parkings stalls to be "Proof of Parking". Pickle ball court relocated to SW corner of site.

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 United Land LLC/ C.O. United Prop. Invest LLC		E-mail naomi.ohnstad@uproperties.co	
	Mailing address 651 Nicollet Mall, Suite 450		City Minneapolis	State MN Zip 55402
	Business address 651 Nicollet Mall, Suite 450		City Minneapolis	State MN Zip 55402
	Daytime phone 952.800.0848	Cell phone 763.360.3072	FAX	
	Naomi Ohnstad <i>Typed/printed name</i>		 <i>Signature</i> Sr. Dev. Manager <i>Title</i>	

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	
	_____ <i>Typed/printed name</i>		_____ <i>Signature</i>	

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.
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