

Development Application

Case no.

		A Committee of the Comm	Type of a	pplication					
X Standard	Staff approval	Hearing E	xaminer [☐ Plan Revisio	n 🗀	Amended	□R	eapplication	
☐ Rezoning				☐ Variance ☐ Ordinance Amendmen ☐ Comprehensive Plan Amendment ☐ Subdivision ☐ Other					endment
Charles and Charles	Site lo	cation 🔳 <i>Additic</i>	nal addresse	s on back	Legal de	scription e	illached		100
Property address 10801 Bush Lake	s Road				Commor Verîzon		***************************************		
Business addres 10801 Bush Lake			1 protection 1						<u>.</u>
PIN Lot I 3211621330116 1			Block 1	Plat nam	e gton RNC /	Addition			
3411041330110		Proposal Full	- documentatio	on must accon	L	···•	agearren:	Salah Bergaran di Salah Salah	
Valiana VE-da			2.1110227110000 III 1110022.1222.2222.2222				777		1.1
		sall a 30' balasted i ad based equipme:					erty, and	: рок уш по	id smaii
Manual Structure Elicon Eli	LEG LEGILLONG VOLLAGE COL	to present equipment.	THE TYTE EACH AS			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
	Comple	te all applicable s	ections — S	elect only ONI	E person .	as primary	contact		
eng Paragasi Samurang Basa Banggan	ada, iki serberga, panggolerer in G <u>alandahan anggoleran</u> an	ari kalendari da kara kara kara kara kara kara kara k	Fee prope	erty owner	Arrie den 1	yy eo gysk yyg we yy hynystaith	rasinisa Cili Malikatak		
Primary contact	Owner name per p Verizon Wireless (E-mail Courtney	.Bednarz2@ver	izonWircles
Additional		Mailing address 10801 Bush Lake Road			City Bloomington			Zip 55438	
owners on Back	Business address 10801 Bush Lake			City Bloomington			State MN	Zip 55438	
	Daytime phone Cell phone (612) 791-8591 (612) 791-85			591 FAX			NA		
	Courtney Bednarz			1 Bed rash			Sr. Manager, Great Plains		
	Typed/printed name			Signature /			Title		
raja ja val 19. semenas.	Company (Marie V. C.) Province (C.)		User/o	ccupant					
Primary	Business name/n	ame					E-mail	D 1	* ************************************
contact	Verizon Wireless Mailing address			City			Courtney.Bednarz2@verizonWireless State Zip		
	10801 Bush Lake Road			Bloomington			MN	55438	
	Business address 10801 Bush Lake			City Bloomingtor	Į.		State MN	Zip 55438	
	Daytime phone Cell phone (612) 791-8591 (612) 791-8			8591 FAX			NA		
	Courtney Bedr	arz ped/printed name		July	ANS Gignatylre	<u> </u>	S L Laborated Company (Laborated)	Sr. Manager, Gi <i>Tille</i>	eat Plains
NOTE: Applic	ations only accept	ed with ALL require	d support		Shaded	areas are	for office	use only	
NOTE: Applications only accepted with ALL required support documents. See Instructions.				Received:					
Deadline for agency action			Reviewed:	Date		By DPC DCC DHE			
60 Days:		20 Days	idaaanidaaahidaaahidaaahidaaa.	Fee paid:	Date	T-F-F-1 - F-F-F-1 - F-F-F-F-	\$		
Planner DRC			□ Admin. approval:	Date	m. Dev't Di	By r. IIP	tanning Div. Ma	nager	
					☐ Othe		9	No. 2017 - 2007 2007 27 d 2 4 2 5 4 3 5 4 5 4	······································
Community	Development	Planning and Econo 1800 W. Old Shako Bioomington MN 5	pee Road	FAX 952-5	63-8920 63-8949 63-8740	E-MAIL p	olanning@ oomingtor	ci.bloomington n.mn.us web_52_001 pg1 of	

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

		Additiona	l parties							
Primary contact	Business name/name Julie Plante, Verizon Wireless Contracto	E-mail jplante@jplanteconsulting.com								
	Mailing address	City		State	Zip					
	3408 Park Ter		Minneapolis		MN	55406				
	Business address		City		State	Zip				
	Daytime phone (612) 242-3673	Cell phone (612) 242-3	673	FAX	\$					
	Julie Plante			Site Acquisition						
	Typed/printed name	Signature	n sign - Auggr	Title						
	Additional fed	e property	owners and address	9 S		5. 新安徽第24 (F. 1847) (1)				
	Business name/name			E-mail						
	Mailing address		City		State	Zip				
	Business address	City		,	State	Zip				
	Daytime phone	Cell phone	ell phone F			AX				
	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						
	Typed/printed name	Signature		Title						
	Business name/name				E-mail					
	Mailing address	City		State	Zip					
	Business address	siness address		ty		Zip				
	Daytime phone		FAX							
	Typed/printed name		Signature	Title						

Use additional sheets or copy form for additional properties