

## 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 Change in condition

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

Property address  
8525/8545 Penn Ave S

Common name

Business address

PIN  
04-027-24-330-002 and 04-027-24-330-001

Lot Block

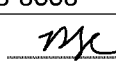
Plat name  
Unplatted 04 027 24

## Proposal Full documentation must accompany application

Change in condition from public access to Penn Avenue to emergency-only access per Hennepin County requirements.

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

### Fee property owner

<input type="checkbox"/> <b>Primary contact</b>  <input checked="" type="checkbox"/> <b>Additional owners on Back</b>	Owner name per property title MCDC Penn LLC/Brian Clemens		E-mail brianjclmens@gmail.com	
	Mailing address 11111 Vincent Ave S	City Bloomington	State MN	Zip 55431
	Business address	City	State	Zip
	Daytime phone	Cell phone 612-616-3553	FAX	
	Brian Clemens <i>Typed/printed name</i>		 <i>Signature</i>	

Owner

Title

### User/occupant

<input checked="" type="checkbox"/> <b>Primary contact</b>	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>	

Title

**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

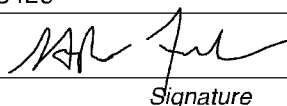
PH 952-563-8920  
FAX 952-563-8949  
TTY 952-563-8740

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

**Development Application**

Case no.

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

Business name/name Penn Lake CityHomes LLC/Steve Furlong		E-mail steve@smartfitdevelop.com	
Mailing address 5123 W 98th St #142	City Bloomington	State MN	Zip 55437
Business address	City	State	Zip
Daytime phone	Cell phone 651-235-6429	FAX	
Steve Furlong <i>Typed/printed name</i>	 <i>Signature</i>	Principal <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**