

## **Development Application**

Case no.  $\begin{tabular}{ll} PL202100256 & PL2021-256 \end{tabular}$ 

			Type of	application							
✓ Standard	Staff approval	Hearing	☐ Plan Revisi	on 🗌 An	nended	☐ Re	application				
□ 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											
		ation ■ Addii	ional addres	ses on back	Legal descr		attached				
Property address 1701 American Bo	s oulevard East, Bloon		Common na	me							
Business addres 1701 American B	<b>s</b> oulevard East, Bloon	nington, MN									
PIN Lot 2				Block Plat name Cedar Park Addn							
		Proposal Fu	ll documenta	ntion must acco	mpany applica	ation					
See attached narrative.											
	0				<u> </u>		<u> </u>				
	Complete	all applicable		-	E person as p	rimary	contact				
	Owner name ner nr	anorty titlo	Fee pro	perty owner			E mail				
☐ Primary	Owner name per property title 1701 American Blvd LLC						E-mail   rustam@caspianrealty.com				
contact	Mailing address			City			State Zip				
Additional	Caspian Group / 7401 Bush Lake Rd Suite 7			Edina			MN 55439				
owners	Business address	Business address			City			tate Zip			
on Back	Daytime phone		e FAX								
				Docusigned by:							
	Rustam Muharan	Rustam Muharamon				Secretary					
	Typed/printed name			<b></b> 0B7740849E644 <b>6S</b> ignature			Title				
			User/	occupant							
✓ Primary	Business name/name						E-mail				
contact	Afrique Hospitality Group LLC			City			Ctata	Zip			
	Mailing address 1701 American Boulevard			Bloomington			State MN				
	Business address			City			State	Zip			
	Daytime phone Cell phor			ne FAX							
	207-344-5571			Docustaned by:							
	Mukletar S	Lariff		CI	EO						
	Туре	ed/printed name	_	B1045849DD044A				Title			
NOTE: Applica	ations only accepted	d with ALL requi	red support		Shaded are	as are	for office	use only			
	Received: Date By										
	Reviewed:	Date By □ PC □ CC □ HE									
60 Days:	Days: 120 Days			Fee paid:	Date \$						
Planner	DR		☐ Admin. approval:	Date		Ву					
	approvan.	☐ Comm. Dev't Dir. ☐ Planning Div. Manager									
					□ Other						
Community I		Planning and Eco 800 W. Old Shak					olanning@c	i.bloomingto .mn.us	n.mn.us		

Bloomington MN 55431-3027

TTY 952-563-8740

web\_52\_001 pg1 of \_\_ (07/09)

Page 2 of\_\_\_\_

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Case no. PL202100256 PL2021-256

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

		Additiona	al parties						
Primary	Business name/name	   E-mail							
contact	Jacob Steen, Larkin Hoffman			jsteen@larkinhoffman.com					
	Mailing address	City		State	Zip				
	8300 Norman Center Drive, Suite 1000	)	Bloomington		MN	55437			
	Business address		City		State	Zip			
	Daytime phone 952-896-3239	Cell phone 651-398-22	:02	FAX	Attorney				
	Jacob W. Steen	Ę							
	Typed/printed name		/ Signature			Title			
	Additional fe	e property	owners and address	es					
	Business name/name			E-mail					
	Mailing address	City			State	Zip			
	Business address		City		State	Zip			
	Daytime phone	Cell phone		FAX	AX				
	Typed/printed name	Title							
	Business name/name			E-mail					
	Mailing address		City		State	Zip			
	Business address		City		State	Zip			
	Daytime phone	Cell phone	1	FAX	!				
	Typed/printed name	Signature		Title					
	Business name/name				E-mail				
	Mailing address		City		State	Zip			
	Business address		City		State	Zip			
	Daytime phone	Cell phone	<u> </u>	FAX					
	Typed/printed name		Signature			 Title			
	lles edditional abo		form for additional pro						