



Development Application

Case no. PL202200055 PL2022-55

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 Prelim/Final Plat Approval Extension

Site location ■ Additional addresses on back ■ Legal description attached

Property address
3700 American Boulevard East

Common name

Business address

PIN
06-027-23-21-0012

Lot 001 Block 001

Plat name
International Airport Park 5th Additi

Proposal Full documentation must accompany application

See attached

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

Fee property owner

<input type="checkbox"/> Primary contact <input type="checkbox"/> Additional owners on Back	Owner name per property title		E-mail	
	Mailing address	City	State	Zip
	Business address	City	State	Zip
	Daytime phone	Cell phone	FAX	
	<div style="display: flex; justify-content: space-between;"> <div>_____ Typed/printed name</div> <div>_____ Signature</div> <div>_____ Title</div> </div>			

User/occupant

<input type="checkbox"/> Primary contact	Business name/name Rsa Development Company, LLP		E-mail	
	Mailing address 334 NE 1st Avenue	City Del Ray Beach	State FL	Zip 33444
	Business address Same	City Same	State Same	Zip Same
	Daytime phone 561-392-7777	Cell phone	FAX 561-392-9900	
	<div style="display: flex; justify-content: space-between;"> <div> Kristin Muir _____ Typed/printed name </div> <div> DocuSigned by: 53657C5F37CD4401 Signature </div> <div> CEO _____ Title </div> </div>			

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.
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
www.ci.bloomington.mn.us

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Additional parties

Additional fee property owners and addresses

Use additional sheets or copy form for additional properties