



Development Application

Case no.

PL202200127 PL2022-127

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
 3700 American Boulevard East

Common name

Business address

 PIN
 06-027-23-21-0012

 Lot
 001

 Block
 001

 Plat name
 International Airport Park 5th Addition

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

User/occupant

<input type="checkbox"/> Primary contact	Business name/name Rosa Development Company, LLP		E-mail kristin@murih.com	
	Mailing address 334 NE 1st Avenue	City Delray Beach	State FL	Zip 33444
	Business address Same	City Same	State Same	Zip Same
	Daytime phone 561-392-7777	Cell phone 561-654-5433	FAX 561-392-9900	
	_____ Kristin Muir <i>Signature</i> CEO <i>Typed/printed name</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.
 1800 W. Old Shakopee Road
 Bloomington MN 55431-3027

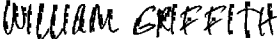
 PH 952-563-8920
 FAX 952-563-8949
 TTY 952-563-8740

 E-MAIL planning@ci.bloomington.mn.us
 www.ci.bloomington.mn.us

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Additional parties	
1	2
3	4
5	6
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9	10
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79	80
81	82
83	84
85	86
87	88
89	90
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97	98
99	100

<input type="checkbox"/> Primary contact	Business name/name Larkin Hoffman / William C. Griffith		E-mail wgriffith@larkinhoffman.com	
	Mailing address 8300 Norman Center Drive, Suite 1000	City Minneapolis	State MN	Zip 55437
	Business address Same	City Same	State Same	Zip Same
	Daytime phone 952-896-3290	Cell phone 612-986-7711	FAX 952-842-1738	
	<div> <div> <div>DocuSigned by:</div> <div>  </div> </div> <div> <div>William C. Griffith</div> <div>Typed/printed name</div> </div> <div> <div>F6D8611455F4465</div> <div>Signature</div> </div> <div> <div>Attorney</div> <div>Title</div> </div> </div>			

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 952-842-1738	
<hr/> <div>Typed/printed nameSignatureTitle</div>					
Business name/name				E-mail	
Mailing address		City		State	Zip
Business address		City		State	Zip
Daytime phone		Cell phone		FAX	
<hr/> <div>Typed/printed nameSignatureTitle</div>					
Business name/name				E-mail	
Mailing address		City		State	Zip
Business address		City		State	Zip
Daytime phone		Cell phone		FAX	
<hr/> <div>Typed/printed nameSignatureTitle</div>					

Use additional sheets or copy form for additional properties