



CITY OF  
**BLOOMINGTON**  
MINNESOTA

# Development Application

Case no.

**PL202200183**

## 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  
2325 W 90th Street & 9000 Penn Ave South

Common name  
Gyropolis

Business address  
2325 W 90th Street

PIN  
0802724410063 & 0802724410064

Lot 1 & 2 Block 1

Plat name  
Winchell's Addition

## Proposal Full documentation must accompany application

The proposal is to combine the properties and expand the Gyropolis restaurant building and parking. The building additions will include trash and receiving to the west and dining room to the east. Also an outdoor patio will be added to the east.

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

### Fee property owner

<input checked="" type="checkbox"/> Primary contact	Owner name per property title <b>Gyropolis Investments</b>		E-mail <b>cc@thegyropolis.com</b>	
	Mailing address <b>2325 W. 90th St.</b>	City <b>Bloomington</b>	State <b>MN</b>	Zip <b>55431</b>
<input type="checkbox"/> Additional owners on Back	Business address <b>9000 Penn Ave S.</b>	City <b>Bloomington</b>	State <b>MN</b>	Zip <b>55431</b>
	Daytime phone <b>952-746-2091</b>	Cell phone <b>952-200-4196</b>	FAX	
Typed/printed name <b>Constantine Contolatis</b>		Signature <i>Constantine Contolatis</i>		Title <b>Chief Manager</b>

### User/occupant

<input checked="" type="checkbox"/> Primary contact	Business name/name <b>GYROPOLIS INC</b>		E-mail <b>cc@thegyropolis.com</b>	
	Mailing address <b>2325 W. 90th St.</b>	City <b>Bloomington</b>	State <b>MN</b>	Zip <b>55431</b>
<input type="checkbox"/> Additional owners on Back	Business address <b>2325 W. 90th St.</b>	City <b>Bloomington</b>	State <b>MN</b>	Zip <b>55431</b>
	Daytime phone <b>952-746-2091</b>	Cell phone <b>952-200-4196</b>	FAX	
Typed/printed name <b>Constantine Contolatis</b>		Signature <i>Constantine Contolatis</i>		Title <b>PRESIDENT</b>

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

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Additional parties					
<input 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		
	<div> <div>_____</div> <div>_____</div> <div>_____</div> </div> <div> <div>Typed/printed name</div> <div>Signature</div> <div>Title</div> </div>				

Additional fee property owners and addresses					
	Business name/name VNY LLC			E-mail vny-llc@gmail.com	
	Mailing address 6576 Carriage Way		City Concordia	State MN	Zip 55340
	Business address 9056 Penn Ave S		City Bloomington	State MN	Zip 55431
	Daytime phone —	Cell phone 612-242-8255	FAX —		
	<div> <div>Venkatesh Vasudevan</div> <div><i>Venkatesh Vasudevan</i></div> <div>President</div> </div> <div> <div>Typed/printed name</div> <div>Signature</div> <div>Title</div> </div>				
	Business name/name			E-mail	
	Mailing address		City	State	Zip
	Business address		City	State	Zip
	Daytime phone	Cell phone	FAX		
	<div> <div>_____</div> <div>_____</div> <div>_____</div> </div> <div> <div>Typed/printed name</div> <div>Signature</div> <div>Title</div> </div>				
	Business name/name			E-mail	
	Mailing address		City	State	Zip
	Business address		City	State	Zip
	Daytime phone	Cell phone	FAX		
	<div> <div>_____</div> <div>_____</div> <div>_____</div> </div> <div> <div>Typed/printed name</div> <div>Signature</div> <div>Title</div> </div>				

Use additional sheets or copy form for additional properties