



Development Application

Case no. PL201700028

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: 8200 & 8201 28th Ave. S., Bloomington Common name: Adjoining Lands
 Business address: _____

PIN: 0102724420007, 0102724420006 Lot: 1 Block: 1 Plat name: Mall of America 4th Addn

Proposal Full documentation must accompany application

1) Guide Plan Amendment; 2) Rezoning to CX-2 District; and 3) Zoning Code Text Amendment.

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

Fee property owner

Primary contact Additional owners on Back

Owner name per property title: DELTA METRO LANDS LLC E-mail: _____
 Mailing address: 60 East Broadway City: Bloomington State: MN Zip: 55425-5550
 Business address: _____ City: _____ State: _____ Zip: _____
 Daytime phone: 952.883.8747 Cell phone: _____ FAX: _____
 Kurt Hagen *[Signature]* SVP Development
 Typed/printed name Signature Title

User/occupant

Primary contact

Business name/name: _____ E-mail: _____
 Mailing address: _____ City: _____ State: _____ Zip: _____
 Business address: _____ City: _____ State: _____ Zip: _____
 Daytime phone: _____ Cell phone: _____ FAX: _____
 _____ _____ _____
 Typed/printed name Signature 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


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

Development Application

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Additional parties

Primary contact

Business name/name <u>Larkin Hoffman c/o William C. Griffith Jr.</u>		E-mail <u>wgriffith@larkinhoffman.com</u>	
Mailing address <u>8300 Norman Ctr Dr., Ste.1000</u>	City <u>Bloomington</u>	State <u>MN</u>	Zip <u>55437-1060</u>
Business address	City	State	Zip
Daytime phone <u>952-896-3290</u>	Cell phone	FAX	
<u>William C. Griffith</u> <i>Typed/printed name</i>	 <i>Signature</i>	<u>Attorney</u> <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