



Development Application

Case no. PL2024-22 PL202400022

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 8945 Lyndale Ave. South Common name Lyndale Plant Services

Business address 8945 Lyndale Ave. South

PIN _____ Lot _____ Block _____ Plat name _____

Proposal Full documentation must accompany application

See attached document for details

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 <u>Rancho Dalco LLC</u>		E-mail <u>LyndaleGC@gmail.com</u>	
	Mailing address <u>P.O. Box 46406</u>	City <u>Eden Prairie</u>	State <u>MN</u>	Zip <u>55344</u>
	Business address <u>301 West 92nd Street</u>	City <u>Bloomington</u>	State <u>MN</u>	Zip <u>55420</u>
	Daytime phone <u>612-210-9513</u>	Cell phone <u>612-210-9513</u>	FAX _____	
	<u>DALLAS J SCHWANOT</u> Typed/printed name		<u>[Signature]</u> Signature	

☐ **Additional owners on Back** _____

MEMBER
Title

User/occupant

<input type="checkbox"/> Primary contact	Business name/name <u>Lyndale Plant Services</u>		E-mail <u>LyndaleGC@gmail.com</u>	
	Mailing address <u>P.O. Box 46406</u>	City <u>Eden Prairie</u>	State <u>MN</u>	Zip <u>55344</u>
	Business address <u>301 West 92nd Street</u>	City <u>Bloomington</u>	State <u>MN</u>	Zip <u>55420</u>
	Daytime phone <u>612-210-9513</u>	Cell phone <u>612-210-9513</u>	FAX _____	
	<u>DALLAS J SCHWANOT</u> Typed/printed name		<u>[Signature]</u> Signature	

MEMBER
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 _____	

Community Development

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