

## **Development Application**

web\_52\_001 pg1 of \_\_ (07/09)

Case no.

			Type of	application							
✓ Standard	Staff approval	Hearing	Examiner	☐ Plan Revi	sion	Amende	d 🗌 Re	eapplicatio	n		
Rezoning Preliminary D Final Develo	Development Plan pment Plan	Compre	✓ Variance ☐ Ordinance Amendment ☐ Subdivision ☐ Other ☐								
Property address 10700 Bloomingto		tion ■ Addit	ional addres	ses on back	Common Countrysi	name					
Business address 10700 Bloomington											
PIN 3111621420070	PIN Lot 3111621420070				Block Plat name  ion must accompany application						
Tenant improverestaurant grou	ement of existing b						new pizza	restaurai	ıt by Trav		
	Complete	all applicable	sections —	Select only O	NE person a	s primar	y contact				
			Fee prop	erty owne	ľ		T= "				
Primary contact	Owner name per property title Steady Management							E-mail sam@teamsteadyrealestate.com			
Additional owners on Back	Mailing address 1609 Hennepin Ave			City Minneapolis			State Zip MN 55403				
	Business address 1609 Hennepin Ave			City	*			State         Zip           MN         55403			
	Daytime phone 952-607-7436	e 436 Authernissa	<u> </u>								
	Sam Steadman			Samuel Steadman 05/01/2024 Owner							
	Typed/printed name				Signature	Title					
	Business name/nam	<u>e</u>	User/c	occupant			E-mail				
✓ Primary	Soul Brothers LLC						mike.brown.travail@gmail.com				
contact	Mailing address 4124 West Broadway Ave			City Robinsdale	City Robinsdale			State Zip MN 55422			
	Business address 4124 West Broadway Ave			City Robinsdale			State         Zip           MN         55422				
	Daytime phone         Cell phone           612-986-2083         612-986-20										
	Mike Brown						Owner				
	Typed/printed name			Signature			Title				
NOTE: Applic	ations only accepted documents. See In		red support			areas ar	e for office	use only			
Deadline for agency action			Received: Date By  Reviewed: Date By □ PC □ CC □ HE								
60 Days: 120 Days			Fee paid:	Date	•						
				☐ Admin.	Date	<u> </u>					
				approval:	☐ Comn	n. Dev't D	Dir. □ Pl	anning Div	. Manager		
Community Development Planning and Economic Dev. 1800 W. Old Shakopee Road Bloomington MN 55431-3027			PH 952-563-8920 E-MAIL planning@ci.bloomington.mn.us FAX 952-563-8949 www.ci.bloomington.mn.us TTY 952-563-8740 web 52 001 pd 1 of (07/09)								

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

		Additiona	al parties								
mary ntact	Business name/name			E-mail							
	Mailing address	City		State	Zip						
	Business address	City		State	Zip						
	Daytime phone		FAX								
	Typed/printed name	Signature	9	Title							
	Additional	fee property	owners and addi	resses							
	Business name/name				E-mail						
	Mailing address		City		State	Zip					
	Business address	Business address			State	Zip					
	Daytime phone	Cell phone		FAX							
	Typed/printed name	Signature	9	Title							
	Business name/name			E-mail							
	Mailing address		City		State	Zip					
	Business address	SS			State	Zip					
	Daytime phone	Cell phone		FAX							
	Timod/nyintad nama										
	Typed/printed name		Signature			Title					
	Business name/name			E-mail							
	Mailing address		City		State	Zip					
	Business address	City		State	Zip						
	Daytime phone Cell phone			FAX	<u></u>						
	Mike Brown		-1112	Owner partner							
	Typed/printed name		Signature			Title					

Use additional sheets or copy form for additional properties



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Case no.

			Type of a	pplication						
✓ Standard	Staff approval Hearing Examiner			Plan Revis	forming	ended	Reapplication			
Rezoning Preliminary D Final Develor	✓ Variance ☐ Ordinance Amendment ☐ Subdivision ☐ Other									
	Site loca	tion 🔳 Addit	ional address	es on back	Legal descri	•	ached			
Property address	on Ferry Rd				Common nan Countryside (			***************************************		
Business addres										
PIN 3111621420070	Block Plat name									
Tanant improv		оваристим метрим метри	особ объемення выполнення в	осе в само в полителения посе в полителения в посе	mpany applica mart\ to area	oceanisticoccupitationesi intercoccupitatico	v nizza r	rootourant	by Travail	
restaurant grou	ement of existing b <del>p.</del>	unumy (previ	ously a yas s	lation/ quick	THAIL) LU GIEA	ile a iiev	w pizza i	estaurant	Dy ITAVAII	
	Complete	all applicable	sections — S	Select only Of	NE person as p	rimary c	ontact			
			Fee prop	erty owner						
Primary contact	Owner name per prop Steady Management				E-mail sam@teamsteadyrealestate.com					
Additional owners on Back	Mailing address 1609 Hennepin Ave			City Minneapolis			State Zip M N 55403			
	Business address 1609 Hennepin Ave			City Minneapolis			State Zip M N 55403			
	Daytime phone 952-607-7436	36		FAX						
	Sam Steadman	Samuel Steadman 05/01/2024 Owner								
	Турес	l/printed name	termination to the second termination termination to the second termination term		Signature		Title			
		ccupant								
✓ Primary	Business name/name Soul Brothers LLC						E-mail mike.brown.travail@gmail.com			
contact	Mailing address 4124 West Broadway Ave			City Robinsdale			itate IN	Zip 55422		
	Business address 4124 West Broadway Ave			City Robinsdale			State Zip MN 55422		VIALANCE AND THE PROPERTY OF T	
	Daytime phone Cell pho 612-986-2083 612-986					FAX				
	Mike Brown				-1NfJ	)	Ow	ner/		
	Турес	l/printed name	mana talaanaanaanaanaanaahaakiini tooriiniiniiniiniiniiniiniiniiniiniiniiniin	од саточности на принципанности в состоя на принципанности на принципанности на принципанности на принципанности	Signature	allum ummuunuunuu on ma	относовногов.	Title	нованического постояння почення поченн	
NOTE: Applic	ations only accepted documents. See In	u de la companya de	red support	LOS DE CONTRACTOR DE CONTRACTO	Shaded area		, , , , , , , , , , , , , , , , , , ,	ise only	essanos a santa	
Deadline for agency action			Received: Date By PC CC HE							
60 Days:	120 Days			Fee paid:						
Planner				☐ Admin. Date			By			
I RAITING				approval:	☐ Comm. Do	ev't Dir.	□ Pla	nning Div. M	lanager	
Community	' <b>#</b>	anning and Eco 300 W. Old Shak			563-8920 E-N		nning@ci mington.r	.bloomingto mn.us	n.mn.us	