

Development Application

Case no. CASE FILE #PL201700262

| | | | Type of a | pplication | | | | | |
|--|---|---|--|--------------------------------------|---|--|--|------------------------------------|--|
| Standard | Staff approval | Hearing E | xaminer | Plan Revisio | on 🗆 An | nended | ☐ Re | application | |
| Rezoning Preliminary D Final Develop | | Conditional Use Interim Use Pe Final Site and E | rmit Building Plan | Other Ap | ensive Plan A proval Extens | sion | : О: | Ordinance Amendment Subdivision | |
| | 2 | cation II Addition | onal addresse | s on back | Section 19 | The second secon | ached | | |
| Property address 7800 & 7850 D | Common name HOM Furniture / Golf Galaxy | | | | | | | | |
| Business addres 10301 Woodcre | ss st DR NW, Coon R | apids, MN 55433 | | | | | | | |
| PIN 04-027-24 12 | 0030 & 04-027-2 | 24 12 0029 | Lot 001 & 002 | Block 001 | Plat name ADDITION | N: HOLL | NBECK | ENTERPRISES | |
| | | Proposal Full | documentati | on must accon | npany applic | ation | | | |
| please see att | ached | | | | | | | | |
| 999-0-Head | ада шан алуынын тайган тайтын адар дарын алан ада алын жалын ада ада ада ада ада ада ада ада ада ад | ооб одон-б-госо остоостве и чет и боле болого фодо-стфо ствен из вистем и чет и чет и чет и чет и чет и чет | о од учения по под пред на пре | | | | | | |
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| | Comple | te all applicable s | ections — S | Select only ON | E person as I | primary co | ontact | | |
| 433 8661916 | | R. 1999 B. 1988 B. | | erty owner | | | P. J. A.D. | | |
| Primary | Owner name per property title | | | | | | E-mail | | |
| contact | Wayne Johansen, HOM Furniture, Inc. | | | | | | wjohansen@homfurniture.com State Zip | | |
| | Mailing address 10301 Woodcrest DR NW | | | City Coon Rapids | | | tate IN | Zip 55433 | |
| owners | Business address | | | City | | | tate | Zip | |
| on Back | Same as mailing Daytime phone Cell phone 612-325-02 | | | FAX 763-772-1500 | | | .0 | | |
| | | | | | | | The second secon | | |
| | Wayne Johansen Typed/printed name | | | Signature | | | Chairman Title | | |
| | A SECOND NO. 18 | 国家国际教训 | liser/o | ccupant | | | | | |
| Primary contact | Business name/name | | | | | | E-mail | | |
| | Mailing address | | | City | | | tate | Zip | |
| | Business address | | | City | | s | tate | Zip | |
| | Daytime phone Cell phone | | | FAX | | | <u>I</u> | | |
| | | | | | ar concernment or your relative to the second | L | · · · · · · · · · · · · · · · · · · · | | |
| | Typed/printed name | | | Signature | | | Title | | |
| NOTE: Applications only accepted with ALL required support documents. See Instructions. | | | | Shaded areas are for office use only | | | | | |
| Deadline for agency action | | | Received: | | | | | | |
| | | | Reviewed: Fee paid: | Date Date | | / 1170 | LICC LINE | | |
| • | D Days: 120 Days | | | ☐ Admin. | Date By | | | | |
| Planner | | | | approval: | ☐ Comm. Dev't Dir. ☐ Planning Div. Manager | | | | |
| | | | | | ☐ Other _ | | | | |
| 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 www.ci.bloomington.mn.us | | | | | | |