



# DEVELOPMENT APPLICATION

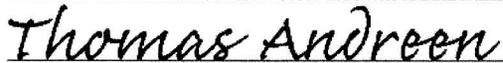
| Property Information  |  |
|---|--|
| <b>Property Address</b> (if multiple addresses, list all on this form or include separate attachments)<br>333 W 86th St, Bloomington, MN 55431 <i>Suite 0</i> |  |
| <b>Business Occupant Address</b> (if different from property address)<br>2100 W Old Shakopee Rd   |  |
| <b>Project Name</b><br>THCHOUSE, LLC ( Cannabis Manufacturing)  |  |
|   |  |

| Type of Application (select all that apply)           |  |   |
|---|--|---|
| <input type="checkbox"/> Preliminary Development Plan | <input checked="" type="checkbox"/> Conditional Use Permit | <input type="checkbox"/> Comprehensive Plan Amendment |
| <input type="checkbox"/> Final Development Plan       | <input type="checkbox"/> Interim Use Permit                | <input type="checkbox"/> Ordinance Amendment          |
| <input type="checkbox"/> Final Site and Building Plan | <input type="checkbox"/> Preliminary Plat                  | <input type="checkbox"/> Rezoning                     |
| <input type="checkbox"/> Variance                     | <input type="checkbox"/> Final Plat                        | <input type="checkbox"/> Other _____                  |

| Property Owner  |                              |   |                     |
|---|------------------------------|---|---------------------|
| <b>Owner Name</b><br>Roger Peters                           |                              | <input type="checkbox"/> <b>Primary Contact</b> (only select one primary) |                     |
| <b>Mailing Address</b><br>333 W 86th St                     | <b>City</b><br>Bloomington   | <b>State</b><br>MN  | <b>Zip</b><br>55431 |
| <b>Business Address</b> (if different from mailing address) | <b>City</b>                  | <b>State</b>  | <b>Zip</b>          |
| <b>Email Address</b><br>roger@petersproperties.com          | <b>Phone</b><br>612-384-6000 |   |                     |

 \_\_\_\_\_ 02/04/2026  
**Property Owner Signature** **Date**

| Business Occupant/Tenant (if different from property owner) |                            |  |                     |
|---|----------------------------|--|---------------------|
| <b>Occupant Name</b><br>Thomas Andreen                      |                            | <input checked="" type="checkbox"/> <b>Primary Contact</b> (only select one primary) |                     |
| <b>Mailing Address</b><br>2100 W Old Shakopee Rd            | <b>City</b><br>Bloomington | <b>State</b><br>MN   | <b>Zip</b><br>55431 |
| <b>Business Address</b> (if different from mailing address) | <b>City</b>                | <b>State</b>   | <b>Zip</b>          |
| <b>Email Address</b><br>contact@cbdhousemn.com              | <b>Phone</b><br>6125781389 |  |                     |

 \_\_\_\_\_ 2/4/2026  
**Occupant/Tenant Signature** **Date**