



Development Application

Case no. PL201800160

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 9624 Lyndale Ave S, Bloomington, MN 55420 Common name _____

Business address 9624 Lyndale Ave S, Bloomington, MN 55420

PIN _____ Lot _____ Block _____ Plat name _____

Proposal Full documentation must accompany application

Interior & Exterior finish upgrades

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

Fee property owner

☐ Primary contact	Owner name per property title Tom Schmitz		E-mail tschmitz@hazafoods.com	
	Mailing address 4415 highway 6	City Sugar Land	State TX	Zip 77478
☐ Additional owners on Back	Business address 4415 highway 6		City Sugar Land	State TX
			Zip 77478	
	Daytime phone 612-616-2231	Cell phone	FAX	
	Tom Schmitz <i>Typed/printed name</i>		 <i>Signature</i>	
			Director of Operations <i>Title</i>	

User/occupant

☐ Primary contact	Business name/name Tom Schmitz - Haza Foods		E-mail tschmitz@hazafoods.com	
	Mailing address 4415 highway 6	City Sugar Land	State TX	Zip 77478
☐ Additional owners on Back	Business address 4415 highway 6		City Sugar Land	State TX
			Zip 77478	
	Daytime phone 612-616-2231	Cell phone	FAX	
	Tom Schmitz <i>Typed/printed name</i>		 <i>Signature</i>	
			Director of Operations <i>Title</i>	

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 ☐ PC ☐ CC ☐ HE
Fee paid:	Date	\$
☐ Admin. approval:	Date	By
	☐ 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
FAX 952-563-8949
TTY 952-563-8740

E-MAIL planning@ci.bloomington.mn.us
www.ci.bloomington.mn.us

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

☒ Primary contact	Business name/name Jacob Gullerud - River Valley Architects			E-mail jacob@rivervalleyarchitects.com	
	Mailing address 1403 122nd Street, suite C		City Chippewa Falls	State WI	Zip 54729
	Business address 1403 122nd Street, suite C		City Chippewa Falls	State WI	Zip 54729
	Daytime phone 715.832.0875	Cell phone	FAX		
	_____ <i>Typed/printed name</i>		_____ <i>Signature</i>		_____ <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