



Development Application

Case no. _____

Type of application

- Standard
 Staff approval
 Hearing Examiner
 Plan Revision
 Amended
 Reapplication
- Rezoning
 Conditional Use Permt
 Varlance
 Ordinance Amendment
- Preliminary Development Plan
 Interlm Use Permit
 Comprehensive Plan Amendment
 Subdivision (Preliminary & Final Plat)
- Final Development Plan
 Final Site and Building Plan
 Other Major revision to preliminary development plans

Site location Additional addresses on back Legal description attached

Property address: 8131 34th Avenue S / Bloomington MN 55425 Common name: _____

Business address: _____

PIN: 0602723240018 Lot: 2 Block: 1 Plat name: APPLETREE SQUARE 5TH ADDITION

Proposal Full documentation must accompany application

New multi-family apartment housing with multi-family amenity spaces and structured parking. Case # at Pre-Application DRC was PL2020-214.

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

Fee property owner

<input type="checkbox"/> Primary contact	Owner name per property title Pats Properties LLC - Attn: Saeid Berenjjan		E-mail saeidb@ctcsoftware.com	
	Mailing address 1000 Boone Ave N #200	City Golden Valley	State MN	Zip 55427
<input type="checkbox"/> Additional owners on Back	Business address 8101 34th Ave S #100		State MN	Zip 55425
	Daytime phone 612-245-4150	Cell phone	FAX	
Saeid Berenjjan <i>Typed/printed name</i>		 <i>Signature</i>		Manager <i>Title</i>

User/occupant

<input type="checkbox"/> Primary contact	Business name/name James Riley - Roers Investments, LLC		E-mail james.riley@roerscompanies.com	
	Mailing address 110 Cheshire Ln Ste 120	City Minnetonka	State MN	Zip 55305
Business address (same as above)		City	State	Zip
Daytime phone 612-751-1285	Cell phone	FAX		
James Riley <i>Typed/printed name</i>		 <i>Signature</i>		Senior Development Ass <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 <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 _____

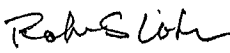
Community Development Planning and Economic Dev. PH 952-563-8920 E-MAIL planning@cl.bloomington.mn.us
 1800 W. Old Shakopee Road FAX 952-563-8949 www.cl.bloomington.mn.us
 Bloomington MN 55431-3027 TTY 952-563-8740

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Additional parties

<input checked="" type="checkbox"/> Primary contact	Business name/name Bob Loken, ESG Architects			E-mail bob.loken@esgarch.com	
	Mailing address 500 Washington Ave S Ste 1080		City Minneapolis	State MN	Zip 55415
	Business address (same as above)		City	State	Zip
	Daytime phone 612-373-4616	Cell phone 917-754-2542	FAX		
	Bob Loken				Principal
	<i>Typed/printed name</i>		<i>Signature</i>		<i>Title</i>

Additional fee property owners and addresses

<i>Typed/printed name</i>			<i>Signature</i>		<i>Title</i>
<i>Typed/printed name</i>			<i>Signature</i>		<i>Title</i>
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Use additional sheets or copy form for additional properties