



Development Application

Case no.

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
4551 West 102nd St. Bloomington 55437

Common name
Olson Middle School

Business address
1350 West 106th St. Bloomington 55431

PIN

Lot

Block

Plat name

Proposal Full documentation must accompany application

Construction of a new 4400 SF building to house chillers and cooling tower that will provide cooling to Jefferson High School with future connections to Olson Middle School and Olson Elementary School

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

Fee property owner

☒ Primary contact	Owner name per property title IDS #271 Bloomington School District		E-mail trybak@isd271.org		
☐ Additional owners on Back	Mailing address 8801 Lyndale Ave S		City Bloomington	State MN	Zip 55420
	Business address 1350 West 106th St.		City Bloomington	State MN	Zip 55431
	Daytime phone 952-806-8766		Cell phone 952-292-2296	FAX	
	_____ Tim Rybak Typed/printed name		_____ Tim Rybak Signature		_____ Director Title

User/occupant

☐ Primary contact	Business name/name IDS #271 Bloomington School District		E-mail trybak@isd271.org		
	Mailing address 8801 Lyndale Ave S		City Bloomington	State MN	Zip 55420
	Business address 1350 West 106th St.		City Bloomington	State MN	Zip 55431
	Daytime phone 952-806-8766		Cell phone 952-292-2296	FAX	
	_____ Tim Rybak Typed/printed name		_____ Tim Rybak Signature		_____ Director Title

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

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