



Development Application

Case no. **PL202100256** **PL2021-256**

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
 1701 American Boulevard East, Bloomington, MN

Common name

 Business address
 1701 American Boulevard East, Bloomington, MN

 PIN
 0202724110020

 Lot
 2

 Block
 1

 Plat name
 Cedar Park Addn

Proposal Full documentation must accompany application

See attached narrative.

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

Fee property owner

☐ Primary contact ☐ Additional owners on Back	Owner name per property title 1701 American Blvd LLC		E-mail rustam@caspiarealty.com	
	Mailing address Caspian Group / 7401 Bush Lake Rd Suite 7	City Edina	State MN	Zip 55439
	Business address	City	State	Zip
	Daytime phone	Cell phone	FAX	
	Designated by: Rustam Muharamov _____ Typed/printed name		Signature _____ Title	

User/occupant

☒ Primary contact	Business name/name Afrique Hospitality Group LLC		E-mail	
	Mailing address 1701 American Boulevard	City Bloomington	State MN	Zip
	Business address	City	State	Zip
	Daytime phone 207-344-5571	Cell phone	FAX	
	Designated by: Mukhtar Shariff _____ Typed/printed name		Signature _____ 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

 Planning and Economic Dev.
 1800 W. Old Shakopee Road
 Bloomington MN 55431-3027

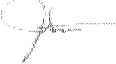
 PH 952-563-8920
 FAX 952-563-8949
 TTY 952-563-8740

 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 Steen, Larkin Hoffman		E-mail jsteen@larkinhoffman.com	
Mailing address 8300 Norman Center Drive, Suite 1000	City Bloomington	State MN	Zip 55437
Business address	City	State	Zip
Daytime phone 952-896-3239	Cell phone 651-398-2202	FAX	
<u>Jacob W. Steen</u> Typed/printed name		 Signature	_____ Attorney Title

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	
_____ Typed/printed name		_____ Signature	_____ Title

Business name/name		E-mail	
Mailing address	City	State	Zip
Business address	City	State	Zip
Daytime phone	Cell phone	FAX	
_____ Typed/printed name		_____ Signature	_____ Title

Business name/name		E-mail	
Mailing address	City	State	Zip
Business address	City	State	Zip
Daytime phone	Cell phone	FAX	
_____ Typed/printed name		_____ Signature	_____ Title

Use additional sheets or copy form for additional properties