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July 14, 2017

Request for Zoning Verification Letter

To:	Planning/Zoning	From:	Cody Carter
Company:	City of Bloomington	Phone:	(405) 253-2436
Phone:	952-563-8920	Fax:	<i>Toll-free 800-986-0586</i>
Email:	<u>N/A</u>	Email:	<u>cocarter@firstam.com</u>

Pages, including this cover page: 3

Subject Property: 1601 East American Blvd; Bloomington, MN
APN: 0202724110057
Use: Holiday Inn Express

At our client's request, please provide the following information:

- **Zoning Compliance/Verification Letter:** Please supply a letter (or use the enclosed template and copy onto letterhead) stating in which zoning district the subject property is currently located, whether or not it is considered to be a permitted use, and any compliance information you may be able to provide. Please use municipality letterhead, or if this is not possible for some reason, please enclose a municipality fax coversheet showing that the zoning letter is enclosed.
- **Adjacent Property Designations and Uses (if known):** Current zoning district in which properties adjacent to the subject property North, South, East & West are located
- **Any Variances, Special Permits or Conditions:** Please note the existence of these items as they relate to the subject property and supply documentation, if available
- **Code Violations:** Please note whether or not there are currently any open/outstanding zoning, building or fire code violations that apply to the subject property
- **Certificates of Occupancy:** Please supply copies of any existing certificates of occupancy for the subject property. If none are available, please state the reason for this and whether there is any expected enforcement action due to the lack of certificate. Also, please specify if a new Certificate of Occupancy would be required in the event of a change in ownership.
- **Approved Site Plan and/or Conditions of Approval,** if applicable: Please supply one or both of these documents, particularly if the subject property is located in a Planned Development

Please advise me at your earliest convenience of any required fees or forms, if any of these items is not available or if I should be directing any portion of my request to another party. I am on a strict timeline so your prompt attention to this matter is greatly appreciated. Upon completion, please forward the information to me **via fax (800-986-0586) or via email (cocarter@firstam.com)** and US mail. I truly appreciate your help with this matter and look forward to your reply. Please do not hesitate to contact me with any questions or concerns you may have. Thank you very much for your assistance!

This telecopy contains privileged and confidential information intended only for the use of the individual named above. If the reader of this telecopy is not the intended recipient you are notified that any dissemination or reproduction is prohibited. If you have received this telecopy in error, please call us collect and return the original telecopy to the address above via US Mail.

Cody Carter, Project Coordinator
CDS Commercial Due Diligence Services
3550 W. Robinson Street Third Floor
Norman, Oklahoma 73072
E-mail: cocarter@firstam.com / Fax# (800) 986-0586/ Contact# (405) 253-2436

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APN: 0202724110057
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In response to your request for information regarding the above-referenced property, we have researched our files and present the following:

1. The current zoning classification for the subject property is _____.
2. According to the zoning ordinances and regulations of this district, the use of the subject property is a:
- Current Use _____
- ☐ Permitted Use by Right
- ☐ Permitted Use by Special/Specific Use Permit (see comments, or attached approval documentation)
- ☐ Permitted Use by Conditional Use Permit (see comments, or attached approval documentation)
- ☐ Legal Non-Conforming Use (use was existing prior to the adoption of the zoning ordinance/code)
- ☐ Non-Permitted Use
3. Adjacent property zoning designation:
- North: _____
- South: _____
- East: _____
- West: _____
4. Conformance: Per current zoning ordinances and regulations applicable to the subject property, the current structure(s) is:
- ☐ Legal Conforming (complies with, or is otherwise exempt from, applicable zoning regulations, including parking)
- ☐ Legal Non-Conforming (does not meet the current zoning requirements due to amendments, re-zoning, variance granted or other changes. See comments)
- ☐ Grandfathered (developed prior to the adoption of the zoning code/ordinance)
- ☐ Non-Conforming (see comments)
- Comment: _____
5. Have any variances, special permits/exceptions, ordinances or conditions been granted/approved for the subject property:
- ☐ No, There do not appear to be any variances, special permits/exceptions, ordinances or conditions that apply to the Subject property.
- ☐ Yes, The following apply to the subject property: _____ Variance
(Documentation/copies attached) _____ Special Permit/Exception
_____ Ordinance
_____ Conditions
- Comment: _____
6. Rebuild: In the event of casualty, in whole or in part, the structure located on the subject property:
- ☐ May be rebuilt in its current form (i.e. no loss of square footage, same footprint, with drive through(s), if applicable).
- ☐ May not be rebuilt in its current form, except upon satisfaction of certain conditions, limitations or requirements. Please see section _____ of the current zoning code/ordinance for details.

7. **Code Violations Information:**

- ☐ There do NOT appear to be any outstanding/open zoning, building, or fire code violations that apply to the subject property.
☐ The following outstanding/open _____ zoning / _____ building / _____ fire code violations apply to the subject property:

Comment: _____

8. **Certificate of Occupancy (required for the use, operation and occupancy of the subject property), status:**

- ☐ A valid Certificate(s) of Occupancy has been issued for the subject property and is/are attached.
☐ A valid Certificate of Occupancy has been issued for the subject property (approximate issuance date _____); However, we are unable to locate a copy in our records. The absence of a Certificate of Occupancy will not give rise to any enforcement action affecting the property.
☐ Certificates of Occupancy have been issued for the subject property; however, for projects constructed prior to the year _____ are no longer on file with this office. The absence of a Certificate of Occupancy will not give rise to any enforcement action affecting the property.
☐ A Certificate of Occupancy is not required for the subject property.

Comments: _____

Certificate of Occupancy requirements for new owner, change of use, tenant improvement etc.:

A new Owner

- ☐ is required to obtain an updated Certificate of Occupancy prior to use (if the use does not change).
☐ is NOT required to obtain an updated Certificate of Occupancy prior to use (if the use does not change).

A new Certificate of Occupancy will be required for the following:

- ☐ Change in Use
☐ Tenant Improvements/Remodel/Reconstruction
☐ Other: _____

9. **Site Plan Information:**

- ☐ The subject property was not subject to a site plan approval process
☐ The subject property was subject to site plan approval; a copy of the approved site plan is attached
☐ The subject property was subject to site plan approval, but a copy of the approved site plan is no longer in existence (*was lost or destroyed*). All other existing documents applicable to site plan approval for the site are attached.
☐ An approved site plan for the subject property is on file, but our office does not have the necessary resources to reproduce and distribute copies of the plan. All other existing documents applicable to site plan approval are attached.
☐ Other, (as noted here): _____

Comment: _____

Further comments regarding the subject property:

This information was researched on _____, 2017, by the undersigned, per request and as a public service. The undersigned certifies that the above information contained herein is believed to be accurate and is based upon, or relates to the information supplied by the requestor. The Authority assumes no liability for errors and omissions. All information was obtained from public records, which may be inspected during regular business hours.

ZONING AUTHORITY:

By: _____

Municipality: _____

Title: _____

Department: _____

Printed Name: _____

Phone: _____