

Property Information

Property Address (if multiple addresses, list all on this form or include separate attachments)

8200 grand ave south suite 300, bloomington, mn 55420

Business Occupant Address (if different from property address)

Project Name

Cannabis Manufacturing – CUP – 8200 Grand Ave S

**Please note that a copy of the property legal description may be required to be uploaded into the permit portal.*

Type of Application (select all that apply)

- | | | |
|-------------------------------------------------------|------------------------------------------------------------|-------------------------------------------------------|
| <input type="checkbox"/> Preliminary Development Plan | <input checked="" type="checkbox"/> Conditional Use Permit | <input type="checkbox"/> Comprehensive Plan Amendment |
| <input type="checkbox"/> Final Development Plan | <input type="checkbox"/> Interim Use Permit | <input type="checkbox"/> Ordinance Amendment |
| <input type="checkbox"/> Final Site and Building Plan | <input type="checkbox"/> Preliminary Plat | <input type="checkbox"/> Rezoning |
| <input type="checkbox"/> Variance | <input type="checkbox"/> Final Plat | <input type="checkbox"/> Other _____ |

Property Owner

Owner Name

John Kimmel

Primary Contact (only select one primary)

Mailing Address

22620 xerxes ave

City

lakeville

State

mn

Zip

55044

Business Address (if different from mailing address)

8200 grand ave south

City

bloomington

State

mn

Zip

55420

Email Address

kimmeljd@gmail.com

Phone

9522885424


John Kimmel (Nov 6, 2025 15:55:49 CST)

Date 11/6/2025

Property Owner Signature

Business Occupant/Tenant (if different from property owner)

Occupant Name

Peter Schmidt

Primary Contact (only select one primary)

Mailing Address

8200 grand ave south suite 300

City

bloomington

State

mn

Zip

55420

Business Address (if different from mailing address)

City

State

Zip

Email Address

peter.schmidt@marawanna.org

Phone

6123229853



11/6/2025

Occupant/Tenant Signature

Date

Planning Division

1800 W Old Shakopee Rd
Bloomington, MN 55431

PHONE: 952-563-8920

EMAIL: planning@BloomingtonMN.gov

Additional Representative (if applicable)

Representative Name Jason Murawski		<input type="checkbox"/> Primary Contact <small>(only select one primary)</small>	
Mailing Address	City	State	Zip
Business Address <small>(if different from mailing address)</small> 8200 grand ave south suite 300	bloomington	mn	55420
Email Address	Phone		
<i>Jason Murawski</i> Representative Signature		Date 11/6/2025	

**Use additional copies of this form or attach additional approval letters as needed.*

APPLICATION PROCESS

1. Verify application material requirements with Planning Division staff and prepare all materials for submittal. The required application materials are outlined in City Code [Chapter 21, Article V, Division A: Approvals and Permits](#). Generally, application materials will include this **signed development application**, a **project narrative**, **building elevation drawings** and scaled **site and civil plans**.
2. Go to [BLM.MN/PORTAL](#) and register a user account for the City's permit portal system.
3. Contact the Planning Division (planning@bloomingtonmn.gov or 952-563-8920) to have staff create a project case file for your application. The applicant cannot create a case file through the portal on their own.
4. Log into your portal user account and upload your application materials to the case file created by staff or email them directly to the Planning Division.
5. After your application materials are uploaded, log into your portal user account and pay the required application fees (see the [Planning Division Fee Schedule](#) handout).
6. Once your application fee is paid and application accepted by the Planning Division, it will then be scheduled for staff review and any required Planning Commission or City Council meetings (see the [Development Application Review Process](#) handout).





Development Application (Updated 2024) (004)

Final Audit Report

2025-11-06

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