Business Address Administration 11

ZONING APPROVAL

FOR ALL BUSINESSES EXCEPT HOME OCCUPATIONS

DATE:	11/7/25		
APPLICANT:	JUSTIN JARSHUC		
BUSINESS NAME:	011 11 2	LIBUORS/TOP SHELF BARTENDING	
ADDRESS:	60 THOMPSON DR U	• • 11 V. • 1 I	
TYPE OF BUSINESS:	TYPE OF BUSINESS: LIQUOX BEVERAGE CATERING		
TELEPHONE:		ZONING DISTRICT: PL (To be completed by the Planning Dept.)	
N	IEW BUSINESS	CHANGE OF ADDRESS	
CHANGE OF OWNERSHIP			
If applicable, what type	of business previously occupied t	the space? (Include name of business if known)	
additions.	additions proposed? If so, ple	ny building structural, mechanical, plumbing or ease describe the nature of the alterations or COM ZoZ4Z90/	
AFTER THIS ZONING APPROVAL FORM HAS BEEN SIGNED, AN OCCUPANTIONAL/BUSINESS LICENSE APPLICATION AND FEE MAY BE ACCEPTED FOR FINAL PROCESSING IN THE FINANCE DEPARTMENT AT LEE'S SUMMIT, MISSOURI CITY HALL. NOTE: This form is required prior to acceptance of an application for an occupational/business license and issuance of a temporary permit to operate if the business location is within the limits of the City of Lee's Summit. New businesses with no physical location within the city do not require this form.			
APPLICANT SIG	NATURE	DEPT. OF PLANNING & DEV.	
performing any	nits are required prior to framing, mechanical, mbing alterations or	CODES ADMINISTRATION VA FIRE DEPARTMENT	