

ZONING APPROVAL
FOR ALL BUSINESSES
EXCEPT HOME OCCUPATIONS

DATE: 12/9/2019
APPLICANT: Amanda Fisher
BUSINESS NAME: Empower Your Pelvis (DBA) Dr. Amanda Fisher, DPT, LIC.
ADDRESS: 668 SE Bayberry Lane Suite 105 Lee's Summit, MO 64063
TYPE OF BUSINESS: Physical Therapy
TELEPHONE: 816-607-1406 ZONING DISTRICT: CP. 1
(To be completed by the Planning Dept.)

NEW BUSINESS X CHANGE OF ADDRESS

CHANGE OF OWNERSHIP

If applicable, what type of business previously occupied the space? (Include name of business if known)

Software Solutions

If locating in a previously occupied space, are there any building structural, mechanical, plumbing or electrical alterations or additions proposed? If so, please describe the nature of the alterations or additions.

adding in a dryer/washer unit

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.

Amanda Fisher
APPLICANT SIGNATURE

APPROVED BY:

[Signature]
DEPT. OF PLANNING & DEV.

[Signature]
CODES ADMINISTRATION

NA
FIRE DEPARTMENT

- ☐ If checked, permits are required prior to performing any framing, mechanical, electrical or plumbing alterations or additions.

*Contingent upon Change of Use permit and License Tax payment