

Added
and Location

**ZONING APPROVAL
FOR ALL BUSINESSES
EXCEPT HOME OCCUPATIONS**

DATE: 2-12-2020
APPLICANT: Nicole Lindemann
BUSINESS NAME: Kidz First Therapy, LLC
ADDRESS: 829 SW Lemans Lane, Lees Summit, MO 64082
TYPE OF BUSINESS: Pediatric Occupational Therapy (Mighty Kids)
TELEPHONE: 816-446-9018 **ZONING DISTRICT:** CP-2
(To be completed by the Planning Dept.)

X **NEW BUSINESS** _____ **CHANGE OF ADDRESS**

CHANGE OF OWNERSHIP

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

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.
Added a wall - see

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.

Business Address
(Administrative Use)

Nicole Lindemann
APPLICANT SIGNATURE

APPROVED BY: [Signature] 2-12-2020
DEPT. OF PLANNING & DEV.

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

* [Signature]
CODES ADMINISTRATION

NA
FIRE DEPARTMENT

* Contingent upon