

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

DATE: 9-17-20  
APPLICANT: Brian K. Ward  
BUSINESS NAME: American Family Insurance  
ADDRESS: 500 SW 3RD ST. SUITE D LEE'S SUMMIT MO 64063  
TYPE OF BUSINESS: INSURANCE OFFICE  
TELEPHONE: 816-524-2300 ZONING DISTRICT: CP-2  
(To be completed by the Planning Dept.)

NEW BUSINESS



CHANGE OF ADDRESS

CHANGE OF OWNERSHIP

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

IGNITING BUSINESS - WEB DESIGN, SEO SERVICES  
MARKETING

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.

No

Business Address  
(Administrative Use)

**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.

Brian K. Ward

APPLICANT SIGNATURE

APPROVED BY:

Jennifer Thompson

DEPT. OF PLANNING & DEV.

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

CODES ADMINISTRATION

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FIRE DEPARTMENT