## **ZONING APPROVAL**

## FOR ALL BUSINESSES EXCEPT HOME OCCUPATIONS 09/28/2021

DATE:		
APPLICANT:	Kaela Jacobs	
BUSINESS NAME:	S NAME: Bungee Up	
ADDRESS:	403 SW Ward Rd. Lee's Summit, MO 64081	
TYPE OF BUSINESS:	Fitness Gym	
TELEPHONE:	888.828.6433	ZONING DISTRICT: (To be completed by the Planning Dept.)
XN	EW BUSINESS	CHANGE OF ADDRESS
C	HANGE OF OWNERSHIP	
If applicable, what type	of business previously occupied th	ne space? (Include name of business if known)
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.  Changing Light fixtures, adding points to hang gym equipment.		
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.		
and issuance of a temp	porary permit to operate if the bus	pplication for an occupational/business license iness location is within the limits of the City of within the city do not require this form.
		APPROVED BY:
Kaela Jacobs		
APPLICANT SI	GNATURE	DEPT. OF PLANNING & DEV.
performing an	rmits are required prior to y framing, mechanical, lumbing alterations or	CODES ADMINISTRATION  FIRE DEPARTMENT