

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

DATE: 11/19/2021
APPLICANT: Jessica Wright
BUSINESS NAME: Ronomi LLC DBA Massage Heights
ADDRESS: 970-D NW Blue Pkwy, Lee's Summit, MO 64086
TYPE OF BUSINESS: Massage Therapy Business
TELEPHONE: 636-577-7811 **ZONING DISTRICT:** _____
(To be completed by the Planning Dept.)

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

If applicable, what type of business previously occupied the space? (Include name of business if known)
The exact same business, this is just a change of ownership. Business was Nine24
Ventures LLC DBA Massage Heights

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. None.

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.

APPROVED BY:


APPLICANT SIGNATURE

DEPT. OF PLANNING & DEV.

CODES ADMINISTRATION

FIRE DEPARTMENT

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