

ZONING APPROVAL
FOR ALL BUSINESSES
EXCEPT HOME OCCUPATIONS

DATE: 12/20/21
APPLICANT: Milton Ferguson
BUSINESS NAME: Your Beauty Supply LLC
ADDRESS: 651 SW 2nd Street, Lee's Summit
TYPE OF BUSINESS: Retail Sales (Beauty Supply)
TELEPHONE: 816-299-5608 ZONING DISTRICT: CP-2
(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)

Same business type - Retail sales of
beauty + cosmetic products.

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 changes will be made to existing
space.

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.

Milton Ferguson
APPLICANT SIGNATURE

APPROVED BY:

DEPT. OF PLANNING & DEV.

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

CODES ADMINISTRATION

NA

FIRE DEPARTMENT