ZONING APPROVAL

FOR ALL BUSINESSES EXCEPT HOME OCCUPATIONS

EXCEPT HOWE OCC	SI ATIONO
DATE: 2-7-22	
APPLICANT: Eric HiL+	
BUSINESS NAME: Hilt Insurance	Inc
ADDRESS: 811 NE Ri	ce Rd
TYPE OF BUSINESS: Farmers Insurance	- agency
TELEPHONE: 816-349-8710	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)	
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.	
Cleaning, Paint and minor lighting	
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:
Fre Helt	
APPLICANT SIGNATURE	DEPT. OF PLANNING & DEV.
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☐ If checked, permits are required prior to	CODES ADMINISTRATION
performing any framing, mechanical, electrical or plumbing alterations or	
additions.	na
	FIRE DEPARTMENT

Business Address

^{** -} Contingent upon completion of change of use permit and inspection process.