

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

DATE: 08-17-2023  
APPLICANT: Shelsea Horn  
BUSINESS NAME: Hair by Shelsea  
ADDRESS: 618 D SW 3RD St, LSUMO 64034  
TYPE OF BUSINESS: HAIR SALON  
TELEPHONE: 816-807-6258 ZONING DISTRICT: CP-2  
(To be completed by the Planning Dept.)

\_\_\_\_\_ NEW BUSINESS \_\_\_\_\_ X \_\_\_\_\_ CHANGE OF ADDRESS  
\_\_\_\_\_ CHANGE OF OWNERSHIP

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

STAFFING COMPANY  
\_\_\_\_\_  
\_\_\_\_\_

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.

INTERIOR WALL TORN DOWN, RESTROOM EXPANDED TO BE ADA  
COMPLIANT, NEW PLUMBING LINE for SHAMPOO BOWLS  
PRCOM20232493

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.

  
\_\_\_\_\_  
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

Business Address  
(Administrative Use)