ZONING APPROVAL

FOR ALL BUSINESSES EXCEPT HOME OCCUPATIONS

DATE:	<u> Берт ач аоач</u>		
APPLICANT:	Mand K Business	Services LLC	
BUSINESS NAME:	MAND K Business	Services LLC	
ADDRESS:	3680 NE AKIN Dri	ve Suite 134	
TYPE OF BUSINESS:	Lees Summit mo	. 64064	
TELEPHONE:	816-786-4904	ZONING DISTRICT:(To be complete	CP-2 ed by the Planning Dept.)
	NEW BUSINESS	CHANG	E OF ADDRESS
c	CHANGE OF OWNERSHIP		
If applicable, what type	of business previously occupied th	e space? (Include name o	f business if known)
NOT 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.			
No mechanical or electrical modifications			
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:			
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APPLICANT S	MANO K BUSINESS SENVICES	LLC DEPT. OF PL	ANNING & DEV.
☐ If checked, pe	ermite are required prior to	1	
performing ar	ermits are required prior to ny framing, mechanical,	CODES AD	MINISTRATION
electrical or p	lumbing alterations or	na na	
additions.		FIRE DE	PARTMENT

Business Address

^{**}Approval contingent upon completion of change of permit process. Process has been started per Mary Bryant - 913-831-1415