## Business Address Administrative Hea

## **ZONING APPROVAL**

## FOR ALL BUSINESSES EXCEPT HOME OCCUPATIONS

DATE:	10/14/24	
APPLICANT:	Brad Andrews	
BUSINESS NAME: EmpowerMe Wellness		
ADDRESS:	1701 Southeast Oldham Parkway	v, #Rehab, Lee's Summit, Missouri 64081-2933
TYPE OF BUSINESS: Outpatient physical, occupational, and/or speech therapy service for senior		l/or speech therapy service for senior living residents.
TELEPHONE:	(727)308-9848	ZONING DISTRICT: CP-2 (To be completed by the Planning Dept.)
N	EW BUSINESS	CHANGE OF ADDRESS
C	HANGE OF OWNERSHIP	
If applicable, what type NA	of business previously occupied th	e space? (Include name of business if known)
		y building structural, mechanical, plumbing or ase describe the nature of the alterations or
OCCUPANTIONAL/B	USINESS LICENSE APPLICA	RM HAS BEEN SIGNED, AN ATION AND FEE MAY BE ACCEPTED ARTMENT AT LEE'S SUMMIT, MISSOURI
and issuance of a temp	orary permit to operate if the bus	oplication for an occupational/business license iness location is within the limits of the City of within the city do not require this form.
2.0	APPROVED BY:	
Carlo Address of the Control of the		
APPLICANT SIGNATURE DEPT. OF I		DEPT. OF PLANNING & DEV.
performing an	rmits are required prior to y framing, mechanical, lumbing alterations or	CODES ADMINISTRATION  na  FIRE DEPARTMENT