ZONING APPROVAL

FOR ALL BUSINESSES EXCEPT HOME OCCUPATIONS

DATE:	7/5/2025		
APPLICANT:	Morgan Spe	encor	
BUSINESS NAME:	Brosonc Solu	SNOCK	
ADDRESS:	524 8W 3va St	0 5	4003
TYPE OF BUSINESS: alsthetics			1002
TELEPHONE:	816.814.4870	ZONING DISTRICT:	(P.)
X		(To be cor	pleted by the Planning Dept.)
	NEW BUSINESS	CH/	NGE OF ADDRESS
	CHANGE OF OWNERSHIP		
If applicable, what type	of business previously occupied	the space? (Include nan	ne of business if known)
	Joen's burber	Sho	
If locating in a previous electrical alterations of additions.	nechanical, plumbing or re of the alterations or		
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:			2
APPLICANT SIG	GNATURE	DEPT. OF	CLANNING & DEV.
performing any	mits are required prior to framing, mechanical, umbing alterations or	NA	DMINISTRATION EPARTMENT