

West Elevation-71.5' wide x 13' high =929 sq. ft. Sign Allowed @ 10% = 92.9 sq. ft. Sign Actual - 30" high x 27'5" wide = 68.75 sq. ft. Channel letters - 30" high x 5" deep - White plexiglas faces with 1" Black Trim Cap & Black painted letter risers

Elgie Long Jr. - 816-224-2949 Fax - 816-224-1144 signwayllc@sbcglobal.net

SIGNWAY LLC 6714 S Shippy Rd. Blue Springs, Mo.

Sleep Solutions Outlet 787-789 NE Rice Rd. Lee's Summit, Mo. Chipman Place Michael Souza - 918-606-0074 / 859-455-1735 michael.souza@tempursealy.com



Permit #PRSGN\_2020 \_ 1104

SIGN PERMIT APPLICATION			
Project Business Name: Sleep Solutions Outlet			
Project Address/Location: 787-789 NE Rice Rd.			
Applicant Elgie Long In / DBA Signway			
Applicant's Address: 6714 S. Shippy Rd. B.S. Mo. 64014			
Applicant's Phone & Fax#: 816-224-2949/816-224-1144			
Applicant's Email Address: Signway co@attinet			
Type of Sign: Check only one			
Wall Sign (\$100)		Monument/Detached Sign (\$100)	
Temporary Sign (\$50)		Directional Sign (\$50)	
Illumination: Specify whether the sign is illum	inated		
Illuminated *		Non-Illuminated	
*NOTE: IF BRANCH CIRCUIT IS NOT CURREN LICENSED ELECTRICAL CONTRACTOR MUST INSTALLATION. ALL SIGNS INVOLVING INTERNAL CIRCUITS SHALL DISPLAY A LABEL CERTIF UNDERWRITER'S LABORATORIES, INC.	OBTAIN EL	LE FOR ILLUMINATED SIGN, A ECTRICAL PERMIT PRIOR TO	
Sign Dimensions and Setbacks for Wall and Monument/Detached Signs			
Height of sign: $30''$ ft (X) Width of sign: $27-5''$ ft (=) Area of sign: $68.75$ sq ft			
Area of building façade/wall: 929 sq ft	Total height o	of detached sign:ft	
Setbacks: front property line:ft	rear p	roperty line:ft	
side property line:ft			
The applicant understands that this permit is issued only for work described here in and included in accompanying plans and specifications. All rights and privileges acquired under the provisions of this Ordinance, or any application thereto, are merely licenses revocable at any time by the Director of Development Services Department.			
Elgie hory h	4-	30-2020	
Signature of Applicant		Date	
For City use only, do not write below this line.			
Electrical Permit Required:	Zoning: CP	-2 Permit Fee: \$100	
□ N/A □ Yes □ No	Receipt #:		
Signature of Plans Examiner	Approved: Pi	anning Division Approval Date	
Remarks:			

Revised October 2017



## OWNDERSHIP AFFIDAVIT

STATE OF MISSOURI		
)		
COUNTY OF JACKSON ) ss.		
Comes now AR-AMILLA		
Who being duly sworn upon his //	r)	
legally described as Hi DMA 100 state that he/she is the owner of the property		
legally described as CHIPMAN Place Carton Structson Lot#4		
SU- Use Arrition Exett Plat, ASURDINISION LOT#4  TRUKSON COUNTY, MESCUE	mit	
in the Sign Application. Owner acknowledges the submission of said application for the subject property under the City of Lee's Summit Unified Development 2	ני י	
property under the City of Least		
occoment Ordina		
Dated this 29th day of April 2020		
, 2020		
( Sand		
Signature of Owner		
THUS, FLOW, GENERAL PORTUGE		
Subscribed and sworn to before me this day of, 20		
, 20		
Net		
Notary Public		
My Commission Expires		
- CApires		