

Special Event Permit Application Form

PERMIT NUMBER:	RECEIPT NUMBER:
SPECIAL EVENT: LEES SUMMIT WEST	High SCHOOL HOMECOMING PARADE
☐ Athletic Event ☐ Mobile Food Vendor	☐ Event Signage
EVENT DATE(S): 10/7/22	EVENT TIME(S): to
EVENT LOCATION/ADDRESS: LSWHS 26	000 SW WARD RO
	ZONING OF PROPERTY:
ADDITIONAL LESS SILVER 1 -7/LS	SWHS PHONE: (816) 986-4000
	FAX: (816) 986 - 4113
	CITY/STATE/ZIP: 655 SUMMIT, M. 64082
PROPERTY OWNER:	PHONE:
CONTACT PERSON:	FAX:
ADDRESS:	CITY/STATE/ZIP:
	KiRK Hierus
PROPERTY OWNER	APPLICANT
Print name:	
Administrative Notes (do not write below this line)	
Approved Development Services Department	