

**CITY OF LEE'S SUMMIT, MISSOURI**  
**AFFIDAVIT OF NOTICE TO PROPERTY**  
**OWNERS WITHIN 300 FEET**

The undersigned Applicant for Application PL2025340, hereby certifies that the Applicant has verified by independent investigation the persons identified on the attached list are all of the owners of all property within 300 feet of the boundaries of the subject parcel, that said notice was mailed on MARCH (month) 20 (day), 20 26 (year) and that notice of the:

- Planning Commission Date and Time of Hearing:** Thursday, April 09, 2026
- City Council Date and time of Hearing:** Tuesday, May 05, 2026

has been mailed by the Applicant to all property owners within 300 feet of the subject parcel at 1900 NW OBRIEN RD, LEES SUMMIT, MO 640811811 NW CHIPMAN RD, LEES SUMMIT, MO 64081 (location or address), at least fifteen (15) or more days prior to the scheduled public hearing. The list of property owners to whom notice has been mailed is attached.

Dated this 20<sup>TH</sup> day of MARCH, 2026

Signature of Applicant or Agent



Printed Name

ERIC SCOTT  
JOHN KNOX VILLAGE

9589 0710 5270 3750 5365 98

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Sent To  
 Street and Apt. No., or PO Box No. **ERIC & LAURA BRANDT**  
**411 NW SHAMPOCK AVE.**  
 City, State, ZIP+4® **LEE'S SUMMIT MD 64081**

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Sent To  
 Street and Apt. No., or PO Box No. **BLUE RIDGE BANK & TRUST**  
**4200 LITTLE BLUE PKWY, STE 100**  
 City, State, ZIP+4® **INDEPENDENCE MD 64057**

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<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage  
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Total Postage and Fees  
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Sent To  
 Street and Apt. No., or PO Box No. **JEFFREY HAUSTEIN**  
**2005 ASHURST DRIVE**  
 City, State, ZIP+4® **LEE'S SUMMIT MD 64081**

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<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage  
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Total Postage and Fees  
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Sent To  
 Street and Apt. No., or PO Box No. **CRAIG ROBINSON**  
**408 NW SHAMPOCK AVE.**  
 City, State, ZIP+4® **LEE'S SUMMIT MD 64081**

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<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage  
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Total Postage and Fees  
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Sent To  
 Street and Apt. No., or PO Box No. **JIMMY & DEBORAH STITT**  
**414 NW SHAMPOCK AVE.**  
 City, State, ZIP+4® **LEE'S SUMMIT MD 64081**

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<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage  
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Total Postage and Fees  
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Sent To  
 Street and Apt. No., or PO Box No. **SUMMIT WOODS GLOBAL LLC**  
**605 W 4TH ST, SUITE 200**  
 City, State, ZIP+4® **EC MD 64112**

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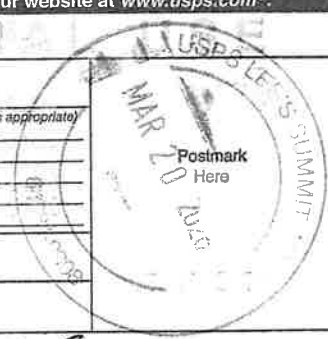
\$

Sent To

CITY OF LEE'S SUMMIT  
P.O. Box 1600  
LEE'S SUMMIT MO 64081

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- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postage

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Total Postage and Fees

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Sent To

WOODSIDE RIDGE MASTER HOA  
10660 BARKLEY ST, STE 200  
OVERLAND PARK, KS 66212

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Postage

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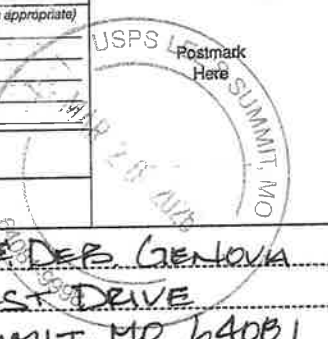
\$

Sent To

JOHN STANLEY & DEB GENOVA  
2013 ASHURST DRIVE  
LEE'S SUMMIT, MO 64081

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Postage

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Total Postage and Fees

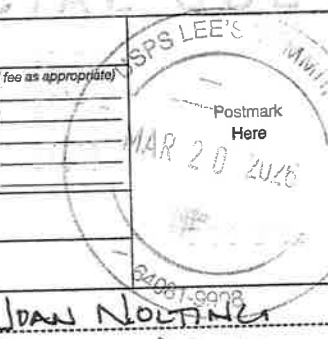
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Sent To

ANTHONY & JOAN NOLTINGER  
2009 ASHURST DRIVE  
LEE'S SUMMIT, MO 64081

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Total Postage and Fees

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Sent To

JACOB & LINDSEY TAYLOR  
412 NW SHAMROCK AVE  
LEE'S SUMMIT, MO 64081

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Postage

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Sent To

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LEE'S SUMMIT MO 64081

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