

FINAL DEVELOPMENT PLAN APPLICATION

1.	PROJECT NAME: LEE'S SUMMIT MEDICAL CENTER - HYBRID OR ADDITION
2.	PROPERTY ADDRESS: 2100 SE Blue, Lee's Summit MO 64063
3.	ZONING OF PROPERTY: <u>CP-2</u>
4.	LEGAL DESCRIPTION (attach if description is metes and bounds description):
	EXISTING FACILITY EXPANSION ON EXISTING PROPERTY
5.	Size of Building(s) (sq. ft): 2300 sf addition to existing bldg Lot Area:
6.	APPLICANT ACI Boland Architects PHONE 816-595-9536
	CONTACT PERSONKeith Crane FAX
	ADDRESS 1710 Wyandott CITY/STATE/ZIP Kansas City, MO 64108
	E-MAIL
7.	PROPERTY OWNER HCA MIDWEST PHONE (816) 282-5018
	CONTACT PERSON John McDonald FAX
	ADDRESS 2100 SE Blue Parkway CITY/STATE/ZIP Lee's Summit MO 64063
	E-MAIL _Johnathan.McDonald@hcahealthcare.com
8.	ENGINEER/SURVEYOR GBA PHONE 913-577-8266
	CONTACT PERSON Clint Loumaster FAX
	ADDRESS 9801 Renner Blvd Suite 300 CITY/STATE/ZIP Lenexa, KS 66219
	E-MAIL cloumaster@gbateam.com
9.	OTHER CONTACTS PHONE
	CONTACT PERSON FAX
	ADDRESS CITY/STATE/ZIP
	E-MAIL
All Api	applications require the signature of the owner on the application and on the ownership affidavit. PROPERTY OWNER APPLICANT
ərir	nt name: <u>John McDonald - HCA Midwest Health</u> Keith Crane - ACI Boland Architects
Ke	ceipt #:Date Filed:Processed by:Application#:



OWNERSHIP AFFIDAVIT

STATE OF MISSOURI)
county of Jackson)
Comes now John McDonald - HCA Midwest Health (owner)
who being duly sworn upon his/her oath, does state that he/she is the owner of the
property legally described as Midwest Division - LSH, LLC d/b/a Lee's Summit Medical Cente
2100 SE Blue Parkway
Lee's Summit MO 64063
in the application for Final Development Plan
(type of application, e.g., rezoning, preliminary or final development plan, etc.).
Owner acknowledges the submission of said application and understands that upon
approval of the application the proposed use specified in the application will be a permitted
use upon the subject property under the City of Lee's Summit Unified Development
Ordinance.
Dated this 12 day of Warch, 20 20
Iterissa Schlenger ny Public - Notary Seel State of Missouri Jackson County Jackson County
minission #08933279 nission Expires April 3, 2020 Signature of Owner John McConal
Printed Name
Subscribed and sworn to before me this
Charissa Schlenger Notary Public
A-3-2020
My Commission Expires

REVISED APRIL 2019