

## FINAL DEVELOPMENT PLAN APPLICATION

1.	PROJECT NAME: Lee's Summit Logistics Building A
2.	PROPERTY ADDRESS: Northwest corner of NE Tudor Road and Sloan
3.	ZONING OF PROPERTY: PI
4.	LEGAL DESCRIPTION (attach if description is metes and bounds description): See Attached
5.	Size of Building(s) (sq. ft): 431,460 sq. ft. Lot Area: 50.93 acres
6.	APPLICANT Scannell Properties, LLC PHONE 317.218.1648
	CONTACT PERSON Shaun Cofer FAX
	ADDRESS 8801 River Crossing Blvd Suite 300 CITY/STATE/ZIP Indianapolis, IN
	E-MAIL shaunc@scannellproperties.com
7.	PROPERTY OWNER Glenn Lowenstein & Lon Lowenstein PHONE
	CONTACT PERSON Glenn Lowenstein & Lon Lowenstein FAX
	ADDRESS 12709 Woodward Street CITY/STATE/ZIP Overland Park, KS 66209
	E-MAIL
8.	ENGINEER/SURVEYOR Olsson PHONE 913.381.1170
	CONTACT PERSON Seth Reece FAX
	ADDRESS 7301 W. 133rd Street, Suite 200 CITY/STATE/ZIP Overland Park, KS 66213
	E-MAIL sreece@olsson.com
9.	OTHER CONTACTS PHONE
	CONTACT PERSON FAX
	ADDRESS CITY/STATE/ZIP
	E-MAIL
	applications require the signature of the owner on the application and on the ownership affidavit. plications without the proper signatures will be deemed incomplete and will not be processed.  APPLICANT
Pr	int name: Marc Pfleging, Manager
Re	ceipt #:Date Filed:Processed by:Application#:



## **OWNERSHIP AFFIDAVIT**

1/
STATE OF MISSES ()
COUNTY OF JACKSON ) ss.
Comes now(owner)
who being duly sworn upon his/her oath, does state that he/she is the owner of the
property legally described as See Attached
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 th day of October, 2021
818 of M
Signature of Owner
Lon Journson Glenn L. Lowenstein
Printed Name
4. la
Subscribed and sworn to before me this day of <u>October</u> , 20 <u>H</u>
CHEYENNE N. WALDEN Notary Public - State of Kansas Notary Public Notary Public
1 Exp. 5 · (4 · 13 )
My Commission Expires