

LS LEE'S SUMMIT MISSOURI

SPECIAL USE PERMIT APPLICATION

1. PROPERTY LOCATION/ADDRESS: 1020 SE. Hamblen Rd. L.S. MO. 64081
2. ZONING OF PROPERTY: Commercial TIME PERIOD REQUESTED: 10yrs
3. DESCRIPTION OF USE: Auto Repair Facility
5. LEGAL DESCRIPTION (attach if description is metes and bounds description): _____
6. Size of Building(s) (sq. ft): 4500 Lot Area (in acres): 1
7. APPLICANT (DEVELOPER) Sam DiGiovanni PHONE 816-916-6932
CONTACT PERSON Sam DiGiovanni FAX _____
ADDRESS 813 Bridgshire Dr. CITY/STATE/ZIP Raytown, MO. 64083
E-MAIL Samdi@digiovanni.com
8. PROPERTY OWNER WADE HERMAN PHONE 816-288-2213
CONTACT PERSON WADE HERMAN FAX _____
ADDRESS _____ CITY/STATE/ZIP _____
E-MAIL _____
9. ENGINEER/SURVEYOR _____ PHONE _____
CONTACT PERSON _____ FAX _____
ADDRESS _____ CITY/STATE/ZIP _____
E-MAIL _____
10. OTHER CONTACTS _____ PHONE _____
CONTACT PERSON _____ FAX _____
ADDRESS _____ CITY/STATE/ZIP _____
E-MAIL _____

All applications require the signature of the owner on the application and on the ownership affidavit. Applications without the proper signatures will be deemed incomplete and will not be processed.

Natalie Herman
PROPERTY OWNER
Print name: Natalie Herman

Sam DiGiovanni
APPLICANT
Sam DiGiovanni

Receipt #: _____ Date Filed: _____ Processed by: _____ Application # _____