



Planning & Zoning Application Form

Staff Use Only	
Case Number:	22-400-04
PC/BOA Meeting:	3-22-22
City Council Dates:	

Application Type (check all that apply)

Land Use	Land Subdivision	Site Development	Use Permit	Other
<input type="checkbox"/> Rezoning <input type="checkbox"/> PUD Rezoning	<input type="checkbox"/> Preliminary Plat <input type="checkbox"/> Final Plat <input type="checkbox"/> Minor Subdivision	<input type="checkbox"/> Final Site Plan <input type="checkbox"/> Preliminary Dev Plan <input type="checkbox"/> Final Dev Plan (PUD)	<input type="checkbox"/> Special Use <input type="checkbox"/> Homebased Business <input checked="" type="checkbox"/> Short-Term Rental	<input type="checkbox"/> Admin. Adjustment <input type="checkbox"/> Variance <input type="checkbox"/> Street Name Change

Project Information and Location

G4 Squared LLC DBA Three Trails Lofts

Project Name

208 1/2 W Lexington Ave Independence, MO 64050

Project Address/Location

2000

Sq. Ft. of Building	Acreage	Number of Lots/Tracts	Steam Buffer (Yes or No)

Existing Zoning	Proposed Zoning	Existing Land Use	Proposed Land Use

Basic Application Requirements (See the Planning & Zoning Application Guide for additional requirements)

<input type="checkbox"/> Completed & Signed Application Form <input type="checkbox"/> Application Fee <input type="checkbox"/> Cover Letter Describing Details of Project	<input type="checkbox"/> Plat Map, Development Plan, or Other Map (24" x 36" & 8.5" x 11" hard copy, and electronic copy) <input type="checkbox"/> Legal Description of the property in question
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Contact Information

Applicant

Name: Travis & Abrielle Gensler

Company: G4 Squared LLC

Address: 22801 NW Ashford Ct

Phone: 816-210-1034

E-mail: travis@threetrailslofts.com

Owner

Name:

Company: G4 Squared LLC

Address: 22801 NW Ashford Ct

Phone: 816-210-1034

E-mail: travis@threetrailslofts.com

Architect/Engineer/Surveyor/Other: _____

Name: _____

Company: _____

Address: _____

Phone: _____

E-mail: _____

Architect/Engineer/Surveyor/Other: _____

Name: _____

Company: _____

Address: _____

Phone: _____

E-mail: _____

The applicant hereby agrees that the information provided above is accurate.

Applicant's Signature _____ Date 12/15/2021

Owner's Signature _____ Date _____