

2023-03018



Planning and Zoning Application Form

Community Development
111 E. Maple Avenue
Independence, MO 64050
(816) 325-7421
cdplanning@indepmo.org

Application Type (check all that apply)

Land Use	Land Subdivision	Site Development	Use Permit	Other
<input checked="" 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 type="checkbox"/> Short-Term Rental	<input type="checkbox"/> Admin. Adjustment <input type="checkbox"/> Variance <input type="checkbox"/> Street Name Change <input type="checkbox"/> Special Sign Permit

Project Information and Location

Project Name: Residential

Project Address/Location: 9519 E Truman Road

Sq. Ft. of Building: 1368 SF Acreage: 1.89 Number of Lots/Tracts: 1 Steam Buffer (Yes or No): _____

Existing Zoning: C-2/R-12 Proposed Zoning: R-6 Existing Land Use: House's Storage Proposed Land Use: House's Residential accessory building

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

<input checked="" type="checkbox"/> Completed & Signed Application Form	<input type="checkbox"/> One 24" x 36" set of plans for Land Sub. & Site Dev.
<input type="checkbox"/> Application Fee	<input type="checkbox"/> One PDF copy of a plat map or site plan
<input type="checkbox"/> Cover Letter Describing Details of Project	<input type="checkbox"/> Legal Description of the property in question

Contact Information

Applicant		Owner	
Name: <u>April Mote</u>	Company: <u>Elevated Spaces LLC</u>	Name: <u>BSM Properties</u>	Company: <u>D+S Investing LLC</u>
Address: <u>17200 E 23rd St S</u>		Address: <u>404 NE Fox Road BSMO 64014</u>	
Phone: <u>816-527-6037</u>	Email: <u>Purposednrandesign.kc@gmail.com</u>	Phone: <u>816 888 9798</u>	Email: <u>Simon Auto LLC @ gmail.com</u>
Architect/Engineer/Surveyor/Other: _____		Architect/Engineer/Surveyor/Other: _____	
Name: _____	Company: _____	Name: _____	Company: _____
Address: _____		Address: _____	
Phone: _____	Email: _____	Phone: _____	Email: _____

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

Applicant's Signature: [Signature] Date: 2/8/2023

Owner's Signature: [Signature] Date: _____