



**City of Kansas City Missouri**  
**OFFICIAL STREET NAME SIGN PLAN APPLICATION**

15th Floor, City Hall; Kansas City, Missouri 64106-2795  
 Phone: (816) 513-2846; Facsimile: (816) 513-2838

Development name: \_\_\_\_\_

Contact information:

Name \_\_\_\_\_

Firm \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone \_\_\_\_\_ FAX \_\_\_\_\_ E-MAIL \_\_\_\_\_

- The street name plan must include the **entire** area of the preliminary plat or preliminary development plan, even if the request is a modification of a portion of a previously approved plat or plan.
- The street name plan **must** include the following information (check boxes to verify):
  - the name of the development and contact person
  - graphic depiction of, or distances to, the nearest section or quarter-section boundaries in all directions
  - any existing public rights of way or private streets within or abutting the development, including the official street names
  - graphic depiction, and subdivision name(s), of any currently platted areas within the development
  - the general location of structures where more than one building is proposed on any given lot or tract
  - any bridges, culverts, railroad crossings or other physical features that could define points of street name transitions
- Please submit **five copies of the proposed street name plan** to: Street Naming Committee, City Development Department, 15<sup>th</sup> Floor City Hall, 414 E 12<sup>th</sup> Street, Kansas City, Missouri 64106, along with a **\$125 fee** (checks should be made out to the City Treasurer) and a **self-addressed envelope of sufficient size for return of an approved copy**. The Street Naming Committee will review plans and make recommendations within two calendar weeks of the receipt of a **complete** application containing **all** the required information. Incomplete submittals will be returned. Revisions to previously approved street layouts that significantly realign streets or change intersections will require reapproval of a street name plan, regardless of whether an amended plat or plan is required.

APPLICANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

<b>For Office Use Only</b>	<b>KIVA BSNP#</b> _____
<b>Date Filed</b> _____	<b>Receipt No.</b> _____

Effective 08/25/08