



**Site Plan Application**  
Community & Economic Development Dept.  
730 First Ter. Suite 2  
Lansing, KS 66043  
(913) 727-5488 • (913) 351-3618 FAX

PROJECT NAME FAMILY EYE CARE CENTER  
ADDRESS OR VICINITY WEST KAY & CENTRE DRIVE  
PROPOSED USE GENERAL BUSINESS  
CURRENT ZONING B-3 Regional Business District  
LEGAL DESCRIPTION LOT 2, LANSING TOWN CENTER 2ND  
REAL ESTATE PARCEL NUMBER 106-24-0-40-07-001.01  
PROPERTY SIZE 1.41 ACRES  
APPLICATION FEE \$150

**APPLICANT/DEVELOPER**

NAME WAGNER CONSTRUCTION CONTACT JEFF WAGNER  
ADDRESS 4517 SHRINE PARK ROAD  
CITY LEAVENWORTH STATE KS ZIP 66048  
PHONE 913-683-0122 EMAIL jwagc1998@gmail.com

**OWNER**

NAME JONATHAN REDDELL CONTACT \_\_\_\_\_  
ADDRESS 324 ASH LANE  
CITY LANSING STATE KS ZIP 66043  
PHONE \_\_\_\_\_ EMAIL jreddell@feclv.com

**ARCHITECT/ENGINEER**

NAME Schulte Engineering & Consulting, LLC CONTACT Doug Schulte  
ADDRESS 21 Gates Dr  
CITY Platte City STATE MO ZIP 64079  
PHONE 816-260-3328 EMAIL doug@schulteengineering.com

APPLICANT/OWNER SIGNATURE \_\_\_\_\_

DATE 8/16/22

APPLICANT/OWNER (printed name) \_\_\_\_\_

OFFICE USE ONLY		
FILE CODE _____	FEE RECEIVED BY _____	DATE _____
PLANNING COMMISSION MEETING DATE _____	DECISION (circle)	Approve or Deny