



LEE'S SUMMIT MISSOURI

Scope of Work Statement

Applicant*: RECREATION WHOLESALE LLC ☒ Contractor ☐ Homeowner ☐ Other _____

*Please use licensed business name if applicable

Primary Contact: PAM SMITHEE Phone: 816-730-6198 Email: accounting@recreationwholesale.com

Project Address: 4716 NE FREEHOLD DR LEE'S SUMMIT MO 64064

Name of Owner: NICK/JILLIAN BENNETT Phone: 402-669-7380

☒ Residential ☐ Commercial Cost of project including labor \$ 96,350.00

Water service	<input type="checkbox"/> Repair	<input type="checkbox"/> Replace	<input type="checkbox"/> Work in right of way?
Sewer service	<input type="checkbox"/> Repair	<input type="checkbox"/> Replace	<input type="checkbox"/> Work in right of way?
Electrical service	<input type="checkbox"/> Repair	<input type="checkbox"/> Replace	Amperage: _____ (Engineer required of ≥ 400)
Accessory Structure	Description: _____ Square feet _____		
Interior Alterations	Description: _____ Square feet _____		
Addition	Description: _____ Square feet _____		
<input type="checkbox"/> Uncovered deck	<input type="checkbox"/> Covered deck	Deck square footage: _____	
<input checked="" type="checkbox"/> Swimming pool	<input type="checkbox"/> HVAC Replacement		
<input type="checkbox"/> Lawn Irrigation	<input type="checkbox"/> Retaining wall over 48"		

Detailed description of work:

Install an in-ground 17'x38' concrete (not gunite) pool with a vinyl liner and pool krete bottom. Excavate pool area, set wall forms and insert rebar, pour concrete walls-cure. Remove forms, pour pool krete bottom, drop liner, set equipment, run electrical wiring and bare copper wire for bonding. Electrician make connections. Rough grade yard-complete

Licensed contractors used for scope of work to be completed:

Mechanical: N/A Electrical: Arrow Circle
Plumbing: N/A Structural: N/A

AFFIDAVIT: I hereby certify that I have the authority to make the foregoing application and that the application, the best of my knowledge, is complete and correct and that the permitted construction will conform to the regulations in the Codes adopted by the City of Lee's Summit and all applicable ordinances.


Signature of Applicant

PAM SMITHEE
Printed Name of Applicant

07/24/2025
Date

Updated 11/2023 Codes Admin/Forms/Codes/Forms/Scope of Work Statement