



# LEE'S SUMMIT MISSOURI

## Scope of Work Statement

Applicant\*: Chad Fry/the Deck Guy  Contractor  Homeowner  Other \_\_\_\_\_

\*Please use licensed business name if applicable

Primary Contact: Chad Fry Phone: 816-509-7853 Email: Chad Fry the Deck Guy@lee-summit.mo.gov

Project Address: 1108 NE Fosham Ct.

Name of Owner: Kyle Jones Phone: 816-808-5856

Residential  Commercial Cost of project including labor \$ 2450.00

- Water service  Repair  Replace  Work in right of way?
- Sewer service  Repair  Replace  Work in right of way?
- Electrical service  Repair  Replace Amperage: \_\_\_\_\_ (Engineer required of  $\geq 400$ )
- Accessory Structure Description: \_\_\_\_\_ Square feet \_\_\_\_\_
- Interior Alterations Description: \_\_\_\_\_ Square feet \_\_\_\_\_
- Addition Description: \_\_\_\_\_ Square feet \_\_\_\_\_
- Uncovered deck  Covered deck Deck square footage: \_\_\_\_\_
- Swimming pool  HVAC Replacement
- Lawn Irrigation  Retaining wall over 48"

Detailed description of work:  
  
Add Steps to Existing Deck

Licensed contractors used for scope of work to be completed:  
Mechanical: \_\_\_\_\_ Electrical: \_\_\_\_\_  
Plumbing: \_\_\_\_\_ Structural: \_\_\_\_\_

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] Chad Fry 12-12-2025  
Signature of Applicant Printed Name of Applicant Date