

Lee's Summit Scope of Work Statement

Codes Administration Department 220 SE Green Street Lee's Summit, MO 64063

Phone: (816) 969-1200 Fax: (816) 969-1201 Revised November 22, 2011

Contractor	: SAS Electrical Cont	Contact Name: Nathan S; mpson
Address:	574 NW1921 Rd	Υ
City:	Kingsvilla	State: MG Zip: Q4001
Phone:	816.847-2433	Fax: 816-847-2443

Project Address:	690 vis Blue Plowy
Name of Owner:	Ceich TILA Inc

Scope of Work:	Tong gover to Job trailer
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Cost of project including labor \$ 250

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.

Shally Si My son, Mampler 4/23/ Printed Name of Applicant Date

.....CODES ADMIN\Code Admin\Forms\Scope of Work Statement.xls

Signature of Owner or Authorized Agent