LEE'S SUMMIT
MISSOURI

Scope of Work Statement

Applicant*: Avital Homes ■Contractor ☐Homeowner ☐Other_____

*Please use licensed business name if applicable

Primary Contact: Amber Jenson Phone: 2087165920 Email: dajeitnson@gmail.com

Project Address: 1937 SW Hightown Dr, Lee's Summit, MO 64082

Name of Owner: Avital Homes Phone: 2087165920

■Residential ☐Commercial Cost of project including labor $ 15,000

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 ≥ 400)
Accessory Structure	Description: _____		Square feet _____
Interior Alterations	Description: Basement Finish		Square feet 580
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:

Interior basement finish on home that already as Certificate of Occupancy. 580 SF

Licensed contractors used for scope of work to be completed:

Mechanical: Apex HVAC Electrical: Red Dog

Plumbing: Reliable Mechanical Services Structural: Everstead

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.

Amber Jenson	Amber Jenson	2.20.26
Signature of Applicant	Printed Name of Applicant	Date

Development Services|220 SE Green Street, Lee's Summit, MO 64063
P: 816-969-1200|F: 816-969-1201|cityofls.net