



LEE'S SUMMIT MISSOURI

Scope of Work Statement

Applicant*: Alexander Edwards Contractor Homeowner Other _____

*Please use licensed business name if applicable

Primary Contact: 8168067882 Phone: 8168067882 Email: alexedwards.ac@gmail.com

Project Address: 2039 SW Farm Field Lane, Lees Summit MO 64082

Name of Owner: Alexander Edwards Phone: 8168067882

Residential Commercial Cost of project including labor \$ _____

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: _____ Square feet _____

Addition Description: _____ Square feet _____

Uncovered deck Covered deck Deck square footage: 300

Swimming pool HVAC Replacement

Lawn Irrigation Retaining wall over 48"

Detailed description of work:

partly covered deck (existing covered patio) will be supported by existing posts holding roof, additional posts will be used as supports shown in diagram on top of existing patio, 4 new concrete piers (14" dia. 48" deep) for larger 12x16 section of deck, 16" on center joist spacing (2x10), 6x6 cedar posts, Simpson Titen bolts, and brackets. 3 ply 2x10 beam spanning 16' of the larger section supported by 2 of the 4 new concrete piers. ledger will be 1 ply 2x10 fastened with LedgerLok fasteners 5" plus 5/8" dia. washers 2". Max height from top of deck treads to adjacent ground is roughly 40".

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.

Alexander Edwards

Signature of Applicant

Alexander Edwards

Printed Name of Applicant

02/23/2026

Date

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

Development Services | 220 SE Green Street, Lee's Summit, MO 64063

P: 816-969-1200 | F: 816-969-1201 | cityofls.net