



**LEE'S SUMMIT**  
MISSOURI

**Scope of Work Statement**

Applicant:	<u>Blue Springs Electrical</u>		
Address:	<u>3402 SW Lake Shore</u>		
City:	<u>Blue Springs</u>	State:	<u>Mo</u> Zip: <u>64014</u>
Primary Contact	<u>Jerry LeCount</u>	Phone:	<u>816 215 3791</u>
On-site Contact	<u>Same</u>	Phone:	<u>816 215 3791</u>

Project Address:	<u>2151 NE Independence Ave</u>
Name of Owner:	

Scope of Work:
<u>Repair damage under ground wire &amp; conduit</u>

Cost of project including labor: \$	<u>3,600.00</u>
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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.

Jerry LeCount  
Signature of Owner or Authorized Agent

Jerry LeCount  
Printed Name of Applicant

5-20-16  
Date

1/27/15 M:\CODES ADMIN\Forms and Handouts\Codes\Forms\Scope of Work Statement.xls