



Applicant: Trl count 1 Plumbing
Address: PO Box 234
City: Kingsville State: MO Zip: 64061
Primary Contact: Don Swafford Phone: 816-956-3607
On-site Contact: Ronan Rogers Phone: 816-918-5556

Scope of Work: Redo Plumbing

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.

Haroon Aggarwal
Printed Name of Applicant

11-10-17
Date