



LEE'S SUMMIT MISSOURI

Scope of Work Statement

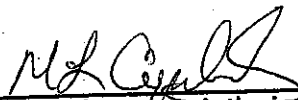
Applicant:	Copeland Electrical		
Address:	2520 S Lee's Summit Rd		
City:	Independence	State:	Mo
Primary Contact:	Mike	Zip:	64055
On-site Contact:	Mike	Phone:	8164613634
		Phone:	5174702

Project Address:	206 SW 3rd St
Name of Owner:	

Scope of Work:	Rewire AS Needed
	Replace SERVICE PANEL - 200 Amp

Cost of project including labor: \$	3500.00
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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.


Signature of Owner or Authorized Agent

Michael Copeland
Printed Name of Applicant

11-14-17
Date

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