

## **Scope of Work Statement**

Applicant: Kevin Highen Cont Contractor/Homeowner/Tenant? (Circle one)
Primary Contact: New Itydon Phone: 816-524-9797
Project Address: 4012 SW Members Ln
Name of Owner: Keuin Higdon Const. Phone: 616-524-9797
Residential)/Commercial? (Circle one)
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)
HVAC repair/replace □
Uncovered deck:   Covered deck:   Square feet:
Accessory Structure:   Description:Square feet
Interior Alterations:   Description:Square feet
Addition: Description:Square feet
Retaining wall over 48"
Swimming pool   Electrical contractor Plumber (NG?)
Lawn irrigation
Other: Bacaut Last 854 soft
bedroom, both & long room
Cost of project including labor \$ 25,000
AFFIDAVIT:   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.
French Keyn Hoden 7-10-18
Signature of Applicant Printed Name of Applicant Date
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