



LEE'S SUMMIT
MISSOURI

Scope of Work Statement

#PPRES20182476

#175.50

Applicant: Recreation Wholesale LLC Contractor/Homeowner/Tenant? (Circle one)
Primary Contact: RON OR CATY Phone: 816-875 1240

Project Address: 2321 NE LAKE BREEZE LN LEE'S SUMMIT MO 64086
Name of Owner: CALEB DENNIS Phone: 913-940-4845
Residential/Commercial? (Circle one)

Water service repair/replace:	<input type="checkbox"/>	Work in right of way?	<input type="checkbox"/>
Sewer service repair/replace:	<input type="checkbox"/>	Work in right of way?	<input type="checkbox"/>
Electrical service repair/replace	<input type="checkbox"/>	Amperage: _____	(Engineer required of ≥ 400)
HVAC repair/replace	<input type="checkbox"/>		
Uncovered deck:	<input type="checkbox"/>	Covered deck:	<input type="checkbox"/> Square feet: _____
Accessory Structure:	<input type="checkbox"/>	Description: _____	Square feet _____
Interior Alterations:	<input type="checkbox"/>	Description: _____	Square feet _____
Addition:	<input type="checkbox"/>	Description: _____	Square feet _____
Retaining wall over 48"	<input type="checkbox"/>		
Swimming pool	<input checked="" type="checkbox"/>	Electrical contractor _____	Plumber (NG?) _____
Lawn irrigation	<input type="checkbox"/>		
Other:	<input type="checkbox"/>	_____	_____

Cost of project including labor \$ 39,000.00

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]
Signature of Applicant

RONALD MARTIN
Printed Name of Applicant

8/3/18
Date

Codes Admin/Forms/Codes/Forms/Scope of Work Statement