

## Scope of Work Statement

Applicant: Allegiant Service braze, The Contractor/Homeowner/Tenant? (Circle one)	
Primary Contact: Tode Holsman Phone: BU 365-8305 mail: took callegian to lectric. can	
Project Address: 910 NW Blue Pkuy Unit Y	
Name of Owner: Red Nevelopment Phone: (enc) 985-5791	
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 Allegiun Plumber (NG?)
Lawn irrigation	
Other:	Extension of electrical gathers + addition of
	KCPL WELVED SErvices
Cost of project including labor \$	5000
AFFIDAVIT: 1 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.	
ADD-412	7000 Holsman 9/10/18
Signature of Applicant	Printed Name of Applicant Date

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