



cc

LEE'S SUMMIT MISSOURI

Scope of Work Statement

Applicant: Anthony Plk Contractor/Homeowner/Tenant? (Circle one) Contractor
 Primary Contact: HUCK REED Phone: 913-647-4852

Project Address: 1920 NE RICE ROAD
 Name of Owner: SUMMIT SELF STORAGE Phone: 816-525-0123
 Residential/Commercial? (Circle one) Commercial

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 checked="" 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 type="checkbox"/>	Electrical contractor _____ Plumber (NG?) _____
Lawn irrigation <input type="checkbox"/>	
Other: <input type="checkbox"/>	
<u>INSTALL AN FOR BTU FURNACE</u>	

Cost of project including labor \$ 3459⁰⁰

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.

Anthony Plk
Signature of Applicant

Anthony Plk
Printed Name of Applicant

10/10/18
Date

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