



LEE'S SUMMIT MISSOURI

Scope of Work Statement

Applicant: Rose Const. Contractor/Homeowner/Tenant? (Circle one)
Primary Contact: Mike Massey Phone: 913 850 2444 Email: mike@buildwithrose.com

Project Address: 450 S.W. Ingview Blvd
Name of Owner: Morgan Rose Phone: 913 782 0777
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: 100 amp (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 X Plumber (NG?) _____
Lawn irrigation ☐
Other: ☐ Heritage Electric
Andy Poecker 913 687-9326
apoecker@heritage-electric.com

Cost of project including labor \$ 1000 8000

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.

Mike Massey
Signature of Applicant

Mike Massey
Printed Name of Applicant

11/28/18
Date

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