

Scope of Work Statement

Applicant: LS Packs Primary Contact: And C	ver	Contr Phone: <u>(% 969</u>	1533 Email: <u>acarr</u>	@ cityofLS.net
Project Address: 1201 N Name of Owner: LS Parks Residential/Commercial? (Circ	le one)	gacy Park Pr	Phone: 8/6 96	g 1533
Water service repair/replace:	D	Work in right of way?	0	
Sewer service repair/replace:		Work in right of way?		
Electrical service repair/replac	e 🗆	Amperage:	_ (Engineer required of ≥	400)
HVAC repair/replace				
Uncovered deck:		Covered deck:	□ Square feet:	
Accessory Structure: Shake Structo	N. E.			
Interior Alterations:		Description:		Square feet
Addition:		Description:		Square feet
Retaining wall over 48"				
Swimming pool		Electrical contractor	Plumber (NG?)	
Lawn irrigation				
Other: Cost of project including lab	or\$	23,000		
AFFIDAVIT: I hereby certify that I have complete and correct and that the perall applicable ordinances.				
Leb-		Indy arr		-20-2019
Signature of Applicant		Printed Name of Applica	nt Date	,