



LEE'S SUMMIT MISSOURI

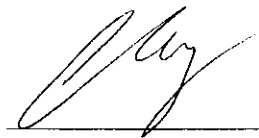
Scope of Work Statement

Applicant: Chad Murphy Contractor/Homeowner/Tenant? (Circle one)
 Primary Contact: _____ Phone: (913) 271-3271 Email: chad@hensleyelectrical.com

Project Address: 1800 NW Chipman Rd Lees Summit MO.
 Name of Owner: _____ Phone: _____
 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 type="checkbox"/>	Electrical contractor <u>Hensley Elect</u>	Plumber (NG?) _____
Lawn irrigation	<input type="checkbox"/>		
Other:	<input checked="" type="checkbox"/>		
Cost of project including labor \$		<u>\$ 2500.00</u>	

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 of Applicant

Chad Murphy

 Printed Name of Applicant

11-22-2019

 Date