



# LEE'S SUMMIT MISSOURI

## Scope of Work Statement

Applicant: Turner Construction Contractor/Homeowner/Tenant? (Circle one)  
Primary Contact: Josh King Phone: 816-832-6477 Email: JrKing@tcco.com

Project Address: 2100 SE Blue Pkwy  
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 $\geq 400$ )
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 checked="" type="checkbox"/>	Description: <u>Under Slab Plumbing</u> Square feet <u>15,000</u>
Addition: <input type="checkbox"/>	Description: _____ Square feet _____
Retaining wall over 48" <input type="checkbox"/>	
Swimming pool <input type="checkbox"/>	Electrical contractor _____ Plumber (NG?) <u>Strayer</u>
Lawn irrigation <input type="checkbox"/>	
Other: <input type="checkbox"/>	
Cost of project including labor \$ <u>5,000</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

Josh King  
Printed Name of Applicant

12/12/2019  
Date