

Scope of Work Statement

Project Address: 2754 Normal Name of Owner: 1665 Sessidential Commercial? (Circ	iE î	n/t 0 Phone: 816-169-1800
Water service repair/replace:		Work in right of way? □
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:		Description: Square feet
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 S	\$1475,00
AFFIDAVIT: I hereby certify that I ha	ve the au	thority to make the foregoing application and that the application, the best of my knowledge, is construction will conform to the regulations in the Codes adopted by the City of Lee's Summit and