



# LEE'S SUMMIT MISSOURI

## DEMOLITION PERMIT APPLICATION

TYPE	Commercial	<input checked="" type="checkbox"/>	Residential	<input type="checkbox"/>	Other	<input type="checkbox"/>
	Commercial Partial	<input type="checkbox"/>	Residential Partial	<input type="checkbox"/>		
DESCRIPTION OF WORK (attach additional pages if necessary)	Machine demolish metal building removing slab and debris hauled away to a legal landfill.					
PROJECT INFORMATION	Most recent use of the structure:		Plans being submitted:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
	Square feet of the structure/area being demolished:	2,410.	Private disposal system being removed:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
	Number of living units being demolished:	1	Underground fuel storage tanks being removed:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
	Number of stories:	1	Estimated cost of demolition:	\$8,500.00		
	Will a crane be utilized in the demolition work:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
PROJECT LOCATION AND OWNER	Project Address:	1305 SW Jefferson St., Lee's Summit, MO 64081				
	Name:	City of Lee's Summit, MO	Phone #:	816-969-1000		
	Address:	220 SE Green St., Lee's Summit, MO 64063	Email:			
APPLICANT (if different)	Business Name:	Industrial Salvage & Wrecking Co, Inc	Phone #:	816 241-5900		
	Contact Name:	Chuck Cacioppo Jr	Email:	info@indwreck.com		
	Address:	3570 Gardner Ave	State:	MO		
	City:	Kansas City	Zip Code:	64120		
CONTRACTOR (if different)	Business Name:		Phone #:			
	Contact Name:		Email:			
	Address:		State:			
	City:		Zip Code:			
UTILITY DISCONNECTS (required for full demolition)	Laclede Gas Approval:	Call 1-314-621-6960 for information.	Received by City Staff	<input type="checkbox"/>		
	KCP&L Approval:	Call 1-888-471-5275 for information.	Received by City Staff	<input type="checkbox"/>		
	Water Approval:	City of Lee's Summit Public Works, Right-of-way Division. 816-969-1800	Received by City Staff	<input type="checkbox"/>		
	Sanitary Approval:	816-969-1800	<a href="#">Right of Way Permits   LSMO</a>	Received by City Staff	<input type="checkbox"/>	

# SUBCONTRACT AGREEMENT

## ARTICLE 1 AGREEMENT

This Agreement is made this 15th day of June, 2020, by and between MegaKC Corporation, hereinafter called the Contractor and Industrial Salvage & Wrecking co. inc. and personally the party signing this subcontract hereinafter called the Subcontractor, to perform part of the Work on the following Project:

**PROJECT:** Jefferson Street Improvements: Persels Rd and Oldham PKWy

**OWNER:** City of Lee's Summit Missouri  
220 SE Green Street  
Lee's Summit, MO 64063  
Phone : (816) 969-1000

**ARCHITECT/  
ENGINEER:** George Butler Associates, Inc.  
9801 Renner Boulevard  
Lenexa, KS 66219  
  
Phone : (913) 577-8257

**CONTRACTOR:** MegaKC Corporation  
1491 Iron Street  
North Kansas City, Missouri 64116  
Phone : (816) 472-8722  
Email : awesselman@megakc.com  
Project Manager : Tyler Wesselman

**SUBCONTRACTOR:** Industrial Salvage & Wrecking co. inc.  
3570 Gardner Ave.  
Kansas City, MO 64120  
  
Phone : (816) 241-5900  
Email : info@indwreck.com  
Attention : Tina Cone

**CONTRACT AMOUNT:** See Exhibit B



**ARTICLE 16  
SPECIAL PROVISIONS:**

**16.1 PRECEDENCE.** It is understood the work to be performed under this agreement, including the terms and conditions thereof, is as described in Articles 1 through 16 together with the following special provisions, which are intended to complement same. However, in the event of any inconsistency, these special provisions shall govern.

**16.2 SCOPE OF WORK.** All work necessary or incidental to complete the Demolition and Removal of Property on Tract 5

work for the project in strict accordance with and reasonable inferable from the contract documents and as more particularly, though not exclusively, specified in

The City of Lee's Summit Missouri standard specifications and Jefferson Street Improvements: Persels rd. to Oldham road plans and specifications

with the following additions or deletions

**16.3 COMMON TEMPORARY SERVICES.** The following "Project" common temporary services and/or facilities are for the use of all project personnel and shall be furnished as herein below noted:

By this Subcontractor;

1. As required by Subcontractor's work.

By others;

1. Port-A-Pot

**16.4 OTHER SPECIAL PROVISIONS.** (Insert here any special provision required by this agreement.)

- 1) Subcontractor to obtain and pay for all required permits.
- 2) Subcontractor to disconnect all necessary utilities.
- 3) Subcontractor to provide domestic water and sewer kills.
- 4) All building and slab removal included with haul off to legal landfill.
- 5) Rough grade to drain after removal is complete.
- 6) Asbestos survey and removal by others. CCJ
- 7) Building to be removed is located at 1305 Southwest Jefferson Street, Lee's Summit, MO 64081

**16.5 CONTRACT DOCUMENTS.** (List applicable contract documents including specifications, drawings, addenda, modifications and exercised alternates. Identify with general description, sheet numbers and latest date including revisions.)

Subcontractor to be supplied digital contract drawings and specifications issued by the above engineering firm along with any addenda that may exist. Additional sets are available at reproduction costs.

1. Bid Documents
2. Specifications & Addenda
3. Plans
4. Exhibit A
5. Exhibit B
6. Exhibit C - Drawing Index
7. Other:

**ARTICLE 17  
RECOGNITION OF SAFETY PROGRAM MANUAL**

**17.1 SAFETY PROGRAM MANUAL.** I hereby acknowledge and agree to the MegaKC Corporation Safety Program Manual that is available at <http://MegaKC Corporation.com/safety-manual/>. I understand that it is my obligation to be aware of the plans, policies and programs contained therein. I agree to read the MegaKC Corporation Safety Program Manual thoroughly and will seek clarification on any policy or provision that I do not understand. I agree that the Subcontractor and its employees will follow MegaKC Corporation Safety Program Manual. I understand that the policies and procedures described in it are subject to change at any time at the sole discretion of MegaKC Corporation.

A printed copy of the MegaKC Corporation Safety Program Manual will be provided upon request.

IN WITNESS WHEREOF, the parties hereto have executed this agreement under seal, the day and year written below.

Industrial Salvage & Wrecking Co. Inc.

Subcontractor

By: Chuck Casapio Jr  
For the Company Subcontractor and Individually as Guarantor

President  
(Title)

6.23.2020  
(Date)

MegaKC Corporation

Contractor

By: EVP  
(Authorized Signature)

EVP  
(Title)

6/29/2020  
(Date)



6-30-2020

info@indwreck.com

The meter has been removed from the following address (es).

**Address**

1305 SW Jefferston St  
Lee's Summit, MO

**Date Removed**

Meter and service removed  
2-29-2020

If you have any questions, please call 471-KCPL or fax 737-7147.

Thank You,

Jana

*Evergy*



Spire Inc.  
Mailing address  
City, State Zip

March 2, 2020

City of Lee's Summit  
City Hall  
220 SE Green  
Lee's Summit, MO 64063  
816-969-1000, EXT 1600

Dear City of Lee's Summit,

This is to notify you that we have abandoned gas service to the address listed below on February 29, 2020.

1305 SW JEFFERSON ST, LEE'S SUMMIT

Sincerely,

Mike Perkins  
Supervisor - Maintenance Department



## Application for Permit to Excavate and/or Construct within Public Right-of-Way

**PLEASE PRINT THIS PERMIT****PERMIT NUMBER: 30855**

This information has been submitted to the City of Lee's Summit as an application to perform work in the public right of way.

1. Please use your browsers PRINT functions to make a copy of this form.
2. A copy of this form must be available at the job site.
3. AFTER you have printed a copy, please complete this process by logging out.

**NOTE:** The fee associated with this permit is only an estimate.  
It is subject to review by the Right of Way Inspector.

By applying and accepting this permit the applicant is subject to and accepts the terms and conditions of Ordinance No. 8347 and Chapter 26 of the City Code.

Permit issued to: Industrial Salvage and Wrecking Co,  
Inc  
3570 Gardner Ave  
Kansas City, Missouri

Contact:  
Charles Cacioppo Jr.  
816-241-5900

Work Location: 1305 SW Jefferson  
SW Persels

Permit Issue Date: 06/24/2020  
Work to Begin: 06/23/2020  
Work to Complete: 06/24/2020

Work Description: abandonment

Work Classification: Other

ESTIMATED FEE FOR THIS PERMIT		
ACTIVITY	DIMENSION	EST. COST
Excavation Length:	20	--
Bore Length:	0	--
Combined Length and Est. Cost:	20	\$80.00
Number of Street Crossings:	0	\$0.00
Number of Poles:	0	\$0.00
Number of Street Cuts:	0	\$0.00
Estimated Total Cost:		\$80.00

SUPPLEMENTAL PERMIT INFORMATION	
ACTIVITY	NUMBER
Number of Sidewalk Cuts:	0





# CERTIFICATE OF LIABILITY INSURANCE

1/1/2021

DATE (MM/DD/YYYY)

3/5/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Lockton Companies 444 W. 47th Street, Suite 900 Kansas City MO 64112-1906 (816) 960-9000	CONTACT NAME:	
	PHONE (A/C, No, Ext):	FAX (A/C, No):
	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A:	
INSURED 1447853 INDUSTRIAL SALVAGE & WRECKING CO. INC. 3570 GARDNER AVE. KANSAS CITY MO 64120	INSURER B: State Auto Property and Casualty Ins Co	25127
	INSURER C: Allied World Surplus Lines Insurance Company	24319
	INSURER D: Midwest Builders Casualty Mutual Company	13126
	INSURER E:	
	INSURER F:	

## COVERAGES

CERTIFICATE NUMBER: 16631791

REVISION NUMBER: XXXXXXXX

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSP	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
C	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	Y	Y	5054-0705	1/1/2020	1/1/2021	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY	Y	Y	BAP2479661	12/9/2020	12/9/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ XXXXXXXX BODILY INJURY (Per accident) \$ XXXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXXX \$ XXXXXXXX
C	<input checked="" type="checkbox"/> UMBRELLA LIAB EXCESS LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED RETENTIONS	Y	Y	5056-0186	1/1/2020	1/1/2021	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$ XXXXXXXX
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	WC100-0001272-2020A	1/1/2020	1/1/2021	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
C	CONTRACTORS POLLUTION LIABILITY	N	N	5054-0705	1/1/2020	1/1/2021	\$2,000,000 AGGREGATE; \$1,000,000 OCCURRENCE

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

RE: BID# 2020-060; DEMOLITION OF 2129 SE 3RD ST AND 245 SE TOPAZ DR; LEE'S SUMMIT, MO; THE CITY, ITS AGENTS, REPRESENTATIVES, OFFICERS, DIRECTORS, OFFICIALS AND EMPLOYEES ARE ADDITIONAL INSURED GENERAL LIABILITY, AUTO LIABILITY AND UMBRELLA LIABILITY ON A PRIMARY AND NON-CONTRIBUTORY BASIS FOR ONGOING AND COMPLETED OPERATIONS WHERE REQUIRED BY CONTRACT. A WAIVER OF SUBROGATION APPLIES WHERE REQUIRED BY CONTRACT AND ALLOWED BY LAW. UMBRELLA FOLLOWS FORM OF THE UNDERLYING POLICIES. 30 DAY NOTICE OF CANCELLATION APPLIES.

## CERTIFICATE HOLDER

## CANCELLATION

16631791

CITY OF LEE'S SUMMIT  
ATTN: PROCUREMENT & CONTRACT SERVICES  
220 SE GREEN ST  
LEE'S SUMMIT MO 64063

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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