



LEE'S SUMMIT MISSOURI

Scope of Work Statement

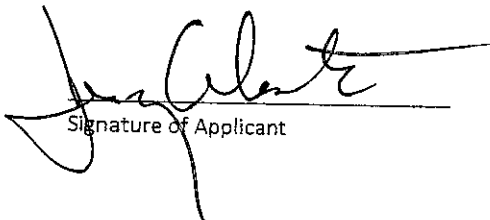
Applicant Celeste Installations Contractor/Homeowner/Tenant? (Circle one)
Primary Contact: Jerry Phone: 816 536 3999 Email: JCB@AAKEYE
WMconnect.com

Project Address: 2907 ES SW ARBORIDGE
Name of Owner: Spectrum CATV Phone: 913-693-1930
Residential/Commercial? (Circle one)

Water service repair/replace: ☐	Work in right of way? ☐
Sewer service repair/replace: ☐	Work in right of way? ☐
Electrical service repair/replace ☒	Amperage: <u>60</u> (Engineer required of ≥ 400)
HVAC repair/replace <u>new</u> ☐	
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 labor \$ <u>750.00</u>

Detailed description of work:
60 Amp Electrical Service for Spectrum
CATV Power Cabinet

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

Jerry Celeste
Printed Name of Applicant

7/31/20
Date