

20202759



LEE'S SUMMIT MISSOURI

Scope of Work Statement

Applicant: COSTAVIOA Contractor/Homeowner/Tenant? (Circle one)
 Primary Contact: Pick Phone: _____ Email: _____

Project Address: 115 SE 29th Hwy LS, MO 64063
 Name of Owner: _____ Phone: _____
 Residential/Commercial? (Circle one) bl.schell89@gmail.com

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 <u>repair/replace</u> <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: <u>3179</u>
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>Stucco</u> <u>Brent Schells</u> Plumber (NG?) _____
Lawn irrigation <input type="checkbox"/>	
Other: <input type="checkbox"/>	Cost of project including labor \$ <u>500⁰⁰</u>

Detailed description of work: _____

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]
 Signature of Applicant

Pickard Blackham
 Printed Name of Applicant

7-2-20
 Date