



20202933

# LEE'S SUMMIT MISSOURI

## Scope of Work Statement

Applicant: <u>REDEEMED IN HOME CARE</u> Contractor/Homeowner/Tenant? (Circle one)	
Primary Contact: <u>816 255-6930</u> Phone: <u>ANDREW WINFREY</u>	Email: <u>ANDREW.WINFREY@YAHOO.COM</u>
Project Address: <u>201 SE SUMMIT, LEE'S SUMMIT, MO</u>	
Name of Owner: <u>ANDREW WINFREY</u> Phone: <u>816 255-6930</u>	
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 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 _____ Plumber (NG?) _____
Lawn irrigation <input type="checkbox"/>	
Other: <input type="checkbox"/>	Cost of project including labor \$ _____

Detailed description of work:

HOUSE HAS BEEN VACANT FOR MORE THEN A YEAR  
I NEED ELECTRICITY - NO WORK THAT NEEDS A  
PERMIT HAS BEEN DONE.

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

Printed Name of Applicant

Date