

Scope of Work Statement

Applicant: Excel Constructors Inc <u>Contractor/Homeowner/Tenant?</u> (Circle one) Primary Contact: Troy Bechtel Phone: 913.915.9410 Email: troy.bechtel@excelconstructors.com		
Project Address: 2861 NE Independence Ave. , Lee's Summit , Mo 64064 Name of Owner: LSMOB Owner LLC Phone: 314-503-5006_ 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	e 🗆	Amperage: (Engineer required of ≥ 400)
HVAC repair/replace		
Uncovered deck:		Covered deck:
Accessory Structure:		Description: Square feet
Interior Alterations:	X	Description: Repair and replace due to water damage Square feet
15,000sf		
Addition:		Description: Square feet
Retaining wall over 48"		
Swimming pool		Electrical contractor :Teague Electric Plumber (NG?)
Lawn irrigation		
Other:		Cost of project including labor \$310,000
Detailed description of work: Remove and replace 18" floodcut of drywall, replace ceiling tile, paint, and		
floorcoverings due to water damage. Remove and replace light fixtures and fire alarm devices that were		
damaged. Replace the components of (2) OR isolation panels to include transformer and circuit breakers,		
panel remains in place.		

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.

ignature of Applicant

TROY BECHTEL

Printed Name of Applicant

Date