

## **Scope of Work Statement**

Applicant: Summit Homes		Contractor/Homeowner/Tenant? (Circle one)			
Primary Contact: Lorrie Landrum		Phone: 816-246-6	700 Email:	Permittir	ng@summithomeskc.com
Project Address: 2029 NW Ashu	ırst Dr				
		Phone:			
Residential) Commercial? (Circle	e one)				
Water service repair/replace:		Work in right of way?			
Sewer service repair/replace:		Work in right of way?			
Electrical service repair/replace		Amperage:	_ (Engineer red	uired of ≥	≥ 400)
HVAC repair/replace					
Uncovered deck:		Covered deck:	□ Squar	e feet:	
Accessory Structure:		Description:			_ Square feet
Interior Alterations:	X	Description: Basemen	t finish		_ Square feet1521
Addition:		Description:			_ Square feet
Retaining wall over 48"					
Swimming pool		Electrical contractor_		Plumber (	(NG?)
Lawn irrigation					
Other: Cost of project including labor \$		8000			
AFFIDAVIT: I hereby certify that I have complete and correct and that the pern all applicable ordinances.			-	-	·
Signature of Applicant	)	Lorrie Landrum Printed Name of Applic	ant		8/21