

Scope of Work Statement

 Applicant:
 Lorrie Landrum
 Contractor Homeowner/Tenant? (Circle one)

 Primary Contact:
 Lorrie Landrum
 Phone:
 816-246-6700
 Email:
 permitting@summithomeskc.com

Project Address:	2118 NW Ashurst Dr		
Name of Owner:		Phone:	
Residential Comm	nercial? (Circle one)		

Water service repair/replace:		Work in right of way?				
Sewer service repair/replace:		Work in right of way?				
Electrical service repair/replace \Box		Amperage:	(Engineer required of ≥ 400)			
HVAC repair/replace						
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: A Raised patio correction Cost of project including labor \$ 3000						

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.

Forrie Landrum

Signature of Applicant

Lorrie Landrum

Printed Name of Applicant

Date