

Scope of Work Statement

Applicant: Lorrie Landrum		Contractor/Homeowner/Tenant? (Circle one)			
Primary Contact: Lorrie La	ndrum	Phone: 816-246-6	5700 Emai	l: permittin	ng@summithomeskc.com
Project Address: 2048 NW Ash	nurst Dr				
		Phone:			
Residential Commercial? (Circ					
Water service repair/replace:		Work in right of way?			
Sewer service repair/replace:		Work in right of way?			
Electrical service repair/replace	9 □	Amperage:	(Engineer	required of	≥ 400)
HVAC repair/replace					
Uncovered deck:		Covered deck:	□ Sq	uare 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: Cost of project including lab	or\$ 30	Raised patio correction			
	JI 7 30				
AFFIDAVIT: I hereby certify that I have	ve the autho	ority to make the foregoing appl	ication and that th	ne application, th	he best of my knowledge, is
complete and correct and that the pe all applicable ordinances.	rmitted cor	struction will conform to the re	gulations in the Co	odes adopted by	the City of Lee's Summit and
ан аррисаме огинилиесь.					
Λ					
Larrie Landrum		Lorrie Landrum			
Signature of Applicant		Printed Name of Applicant		Date	