



LEE'S SUMMIT MISSOURI

Scope of Work Statement

Applicant: CFG Wealth Mgmt. Contractor ☐ Homeowner ☐ Tenant ☒
Primary Contact: Mark Beatty Phone: 816-392-9621 Email: Mark@4genconstruction.com

Project Address: 504 SW 3rd St, UNIT D, Lee's Summit MO. 64063
Name of Owner: Raytown Teachers Credit Union Phone: 816-392-9621
Residential ☐ Commercial ☒

Check all that Apply

Water service	Repair <input type="checkbox"/>	Replace <input type="checkbox"/>	Work in right of way? <input type="checkbox"/>
Sewer service	Repair <input type="checkbox"/>	Replace <input type="checkbox"/>	Work in right of way? <input type="checkbox"/>
Electrical service	Repair <input type="checkbox"/>	Replace <input checked="" type="checkbox"/>	Amperage: _____ (Engineer required of ≥ 400)
HVAC	Repair <input type="checkbox"/>	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 <u>Garwin Electric</u>	Plumber (NG?) _____
Lawn irrigation	<input type="checkbox"/>		
Other:	<input type="checkbox"/>	Cost of project including labor \$ <u>2,500</u>	
Detailed description of work:			

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

Mark Beatty

Printed Name of Applicant

4/21/21

Date