



LEE'S SUMMIT MISSOURI

Scope of Work Statement


Applicant: Kasa Electric Contractor/Homeowner/Tenant? (Circle one)
Primary Contact: Chris Wickizer Phone: 913-200-0740 Email: Chris@kasaelectric.com

Project Address: 2150 NE Independence Ave. Lee's Summit MO 64064
Name of Owner: Automotive Detail Center Phone: _____
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 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 KASA Elect .Plumber (NG?) _____
Lawn irrigation
Other: Temporary Service Permit 200-Amp Single
phase

Cost of project including labor \$ 1,000.00

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

Chris Wickizer
Printed Name of Applicant

3/6/21
Date