



LEE'S SUMMIT MISSOURI

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: 111 NW Grady Ct
Name of Owner: _____ Phone: _____
Residential/Commercial? (Circle one)

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|--|---|
| Water service repair/replace: <input type="checkbox"/> | Work in right of way? <input type="checkbox"/> |
| Sewer service repair/replace: <input type="checkbox"/> | Work in right of way? <input type="checkbox"/> |
| Electrical service repair/replace <input type="checkbox"/> | Amperage: _____ (Engineer required of ≥ 400) |
| HVAC repair/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 checked="" type="checkbox"/> | Description: Basement finish Square feet: 749 _____ |
| Addition: <input type="checkbox"/> | Description: _____ Square feet _____ |
| Retaining wall over 48" <input type="checkbox"/> | |
| Swimming pool <input type="checkbox"/> | Electrical contractor _____ Plumber (NG?) _____ |
| Lawn irrigation <input type="checkbox"/> | |
| Other: <input type="checkbox"/> | _____ |

Cost of project including labor \$48685

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.

Lorrie Landrum
Signature of Applicant

Lorrie Landrum
Printed Name of Applicant

5/18/21
Date