



LEE'S SUMMIT MISSOURI

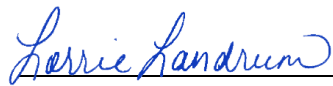
Scope of Work Statement

Applicant: <u>Summit Homes</u>	<u>Contractor</u> /Homeowner/Tenant? (Circle one)
Primary Contact: <u>Lorrie Landrum</u>	Phone: <u>816-246-6700</u> Email: <u>Permitting@summithomeskc.com</u>

Project Address: <u>2105 SW Osage Dr</u>
Name of Owner: _____ Phone: _____
<u>Residential</u> /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: <u>Lower Level Finish</u> Square feet <u>683</u>
Addition: ☐	Description: _____ Square feet _____
Retaining wall over 48" ☐	
Swimming pool ☐	Electrical contractor _____ Plumber (NG?) _____
Lawn irrigation ☐	
Other: ☐	
Cost of project including labor \$ <u>58055</u>	

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

Lorrie Landrum
Printed Name of Applicant

9/8/2021
Date