



LEE'S SUMMIT MISSOURI

Scope of Work Statement

Applicant: Recreation Wholesale LLC Contractor ☒ Homeowner ☐ Tenant ☐
Primary Contact: Shandra Mortensen Phone: 816-730-6498 Email: accounting@recreationwholesales.com

Project Address: 625 NE Edgewood Ct
Name of Owner: Mike + Kathryn Harvel Phone: 816-564-9499
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 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 checked="" type="checkbox"/>	Electrical contractor <u>Homeowner Mike Harvel</u>	Plumber (NG?) _____
Lawn irrigation	<input type="checkbox"/>		
Other:	<input type="checkbox"/>	Cost of project including labor \$ <u>70,650</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

Shandra Mortensen
Printed Name of Applicant

11/12/2021
Date