

Scope of Work Statement

Applicant: Cosgrove Construction, Inc, Contractor/Homeowner/Tenant? (Circle one)				
Primary Contact: Shane Kell	ler	Phone: <u>815-557-222</u>	3 Email: skeller@cosgroveconstructioninc.com	
Project Address: 540 NW Chip	oman D	and Loo's Summit MO 6	1096	
•			Phone: 331-233-5807	
Residential/Commercial (Circ			FIIOHE. <u>331-233-3607</u>	
residential/Commercial: (Circ	le one,			
Vater service repair/replace:		Work in right of way?		
Sewer service repair/replace:		Work in right of way?		
lectrical service repair/replac	e 🛭	Amperage:	_ (Engineer required of ≥ 400)	
IVAC repair/replace				
Jncovered deck:		Covered deck:	□ Square feet:	
Accessory Structure:		Description:	Square feet	
nterior Alterations:		Description:	Square feet	
Addition:		Description:	Square feet	
 Retaining wall over 48"				
Swimming pool		Flectrical contractor Ca	pital Electric Plumber (NG?)	
awn irrigation		Electrical contractor <u>se</u>	rumber (NG:)	
Other:	X	Cost of project include	ling lahor \$	
Detailed description of work:		emporary Electrical Service		
zetanea aesemption or work.			_	
ΔΕΕΙΝΔΥΙΤ: Ι hereby certify that I ha	ve the aut	hority to make the foregoing applic	cation and that the application, the best of my knowledge, is	
• •		, , , , , , , , , , , , , , , , , , , ,	ulations in the Codes adopted by the City of Lee's Summit and	
all applicable ordinances.				
		Shane Keller	01/25/22	
Signature of Applicant		Printed Name of Applic	ant Date	