



LEE'S SUMMIT MISSOURI

Scope of Work Statement

Applicant: Recreation Wholesale LLC Contractor ☒ Homeowner ☐ Tenant ☐
Primary Contact: Shandra Mortensen Phone: 816-730-6198 Email: accounting@recreationwholesale.com

Project Address: 3112 SW Arboridge Dr Lee's Summit MO 64082
Name of Owner: David Kubayko Phone: _____
Residential ☒ Commercial ☐

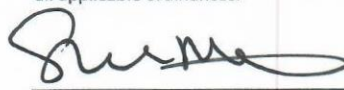
Check all that Apply

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 <u>Arrow Circle Electric</u>	Plumber (NG?) _____
Lawn irrigation	☐		
Other:	☐	Cost of project including labor \$	<u>37,740</u>

Detailed description of work:

Install 12x24 inground swimming pool, steel walls, liner, 4' concrete pool deck around perimeter per code compliance

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

2/18/2022
Date