



# LEE'S SUMMIT MISSOURI

## Scope of Work Statement

Applicant: DEERFIELD CONSTRUCTION Contractor/Homeowner/Tenant? (Circle one)  
Primary Contact: BRETT BITZER Phone: 513-600-6293 Email: BRETT.BITZER@DEERFIELD1.COM

Project Address: 710 SE BLUE PKWY. LEE'S SUMMIT MO.  
Name of Owner: CROSS DEVELOPMENT Phone: 513-504-6257  
Residential/Commercial? (Circle one)

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 checked="" type="checkbox"/>	Amperage: <u>200</u>	(Engineer required of $\geq 400$ )
HVAC repair/replace	<input type="checkbox"/>		
Uncovered deck:	<input type="checkbox"/>	Covered deck:	<input type="checkbox"/> Square feet: _____
Accessory Structure:	<input type="checkbox"/>	Description: <u>JOB TRAILER</u>	Square feet <u>400</u>
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 type="checkbox"/>	Electrical contractor <u>MD ELECTRIC</u>	Plumber (NG?) _____
Lawn irrigation	<input type="checkbox"/>		
Other:	<input type="checkbox"/>	Cost of project including labor	\$ <u>2,000</u>

Detailed description of work:

TEMP OFFICE TRAILER FOR NEW CALIBER COLLISION CENTER

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.

Brett Bitzer  
Signature of Applicant

BRETT BITZER  
Printed Name of Applicant

3/7/22  
Date