



# LEE'S SUMMIT MISSOURI

## RELEASE FOR LAWN SPRINKLER SYSTEM IN CITY OF LEE'S SUMMIT RIGHT OF WAY (RESIDENTIAL)

In consideration for the City of Lee's Summit's permission to extend a Lawn Irrigation System into the City's right of way at (legal description of the property):

Lot No. 78 Plat Title Lebanon Ridge Address: 325 NW Ambergham Dr  
County: Jackson State: MO

I, Truman Homes LLC, the undersigned, successors, and assigns do hereby release and forever discharge the City of Lee's Summit, its employees and/or agents from and against any and all liability, claims and demands for any use arising out of, relating to, or being in any way connected with work or service by the City, its employees or agents within the City's right of way for any purpose whatsoever.

NOW THEREFORE, the Undersigned hereby declares that said property described above shall be held, sold and conveyed subject to the release herein and said release shall run with the real property and be binding on all parties having any part thereof, their heirs, successors and assigns.

IN WITNESS WHEREOF, this release has been read, signed and sealed this 27 day of December, 2021.

By: Mark Yanick Truman Homes LLC  
MARK YANICK Truman Homes LLC  
Printed or Typed Name

### INDIVIDUAL ACKNOWLEDGMENT

STATE OF MISSOURI  
COUNTY OF JACKSON

ON THIS, The 27 day of December, 2021, before me, a Notary Public, personally appeared:  
MARK YANICK

proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) subscribed to the within instrument, and acknowledged that he/she/they executed the same for the purposes stated therein and no other.

WITNESS my hand and official seal in the County and State aforesaid, the day and year first above written.

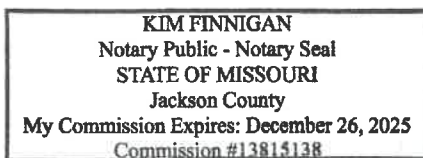
/s/ Kim Finnigan  
Notary Public Signature

Kim Finnigan  
Printed or Typed Name

My Commission Expires:

12-26-25

(Seal)



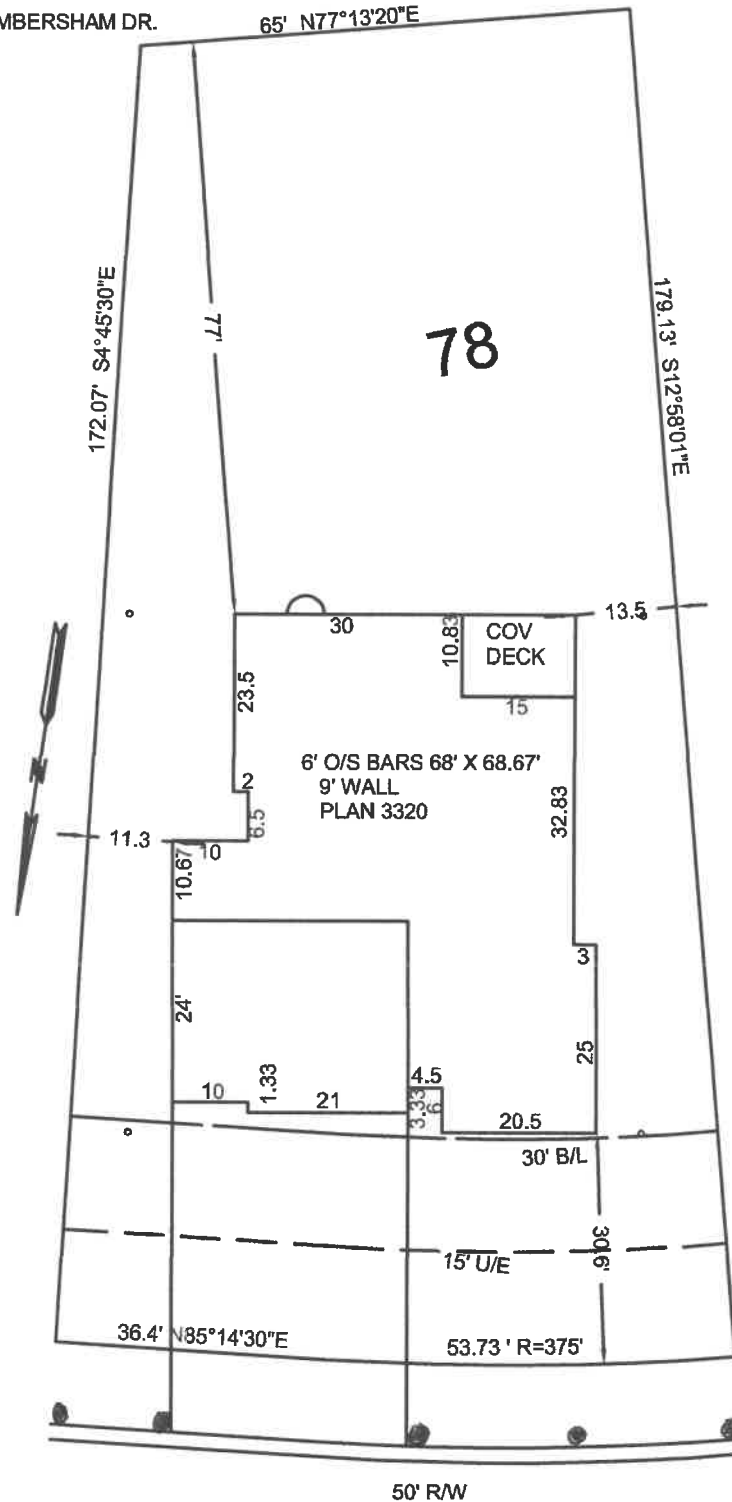
# CONSTRUCTION STAKE PLOT PLAN

ORDERED BY: TRUMARK HOMES

DESCRIPTION: LOT 78, WOODSIDE RIDGE 1ST PLAT, IN LEE'S SUMMIT, MO

321 NW AMBERSHAM DR.

65' N77°13'20"E



● = Sprinkler Heads

## NW AMBERSHAM DRIVE

— = DRAINAGE PATTERN

CONSTRUCTION ENGINEERING SERVICES, INC.

16810-C East 40 Highway

Independence, MO 64055

(816)478-2323

lee@engineeringkc.com

SCALE: 1"=20'

DATE: 12-07-2020

JOB NO: 17461

LEE BODENHEIMER, L.S.  
Land Surveyor



220 SE GREEN ST, LEE'S SUMMIT, MO 64064  
PHONE: (816) 969-1930 FAX: (816) 969-1935  
EMAIL: backflow@cityofls.net WEB: lswater.net

### BACKFLOW PREVENTION ASSEMBLY TEST DATA AND MAINTENANCE REPORT

CUSTOMER <i>ROMARK HOMES</i>	
SERVICE ADDRESS <i>325 NW AMBERSHAM DR</i>	
LOCATION OF BACKFLOW ASSEMBLY ON PROPERTY <i>BASEMENT AREA</i>	
DATE OF TEST <i>12-28-2021</i>	TIME <i>1:10</i> <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M.
SUPPLY PRESSURE <i>85</i> LBS	AIR GAP (2 X SUPPLY DIAMETER) SUPPLY <i>1/4</i> IN. GAP <i>1/4</i> IN. <input type="checkbox"/> PASS <input type="checkbox"/> FAIL
TYPE OF ASSEMBLY <input checked="" type="checkbox"/> PPS <input type="checkbox"/> RP <input type="checkbox"/> DCDA (DETECTOR) <input type="checkbox"/> RPDA (DETECTOR) <input type="checkbox"/> PVB* (SEE BOTTOM OF FORM)	MANUFACTURER <i>FEBCO</i>
MODEL <i>850</i>	SIZE <i>3/4</i>
SERIAL NUMBER <i>HF-18547</i>	
HEIGHT OFF FLOOR <i>4</i> FT <input type="checkbox"/> IN	PROTECTION FROM: FREEZING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO FLOODING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
SUPPLY SOURCE: <input checked="" type="checkbox"/> PUBLIC POTABLE WATER <input type="checkbox"/> NON-POTABLE WATER (e.g., LAKE) <input type="checkbox"/> BOTH	
NEW INSTALLATION <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
<b>INITIAL TEST</b>	
REDUCED PRESSURE PRINCIPLE ASSEMBLY: <input type="checkbox"/> PASSED <input type="checkbox"/> FAILED	
RELIEF VALVE OPENED AT _____ PSID (2 PSID or more) <input type="checkbox"/> PASSED <input type="checkbox"/> FAILED	
2ND CHECK held backpressure <input type="checkbox"/> PASSED <input type="checkbox"/> FAILED	
NO. 2 SHUTOFF VALVE leak tight <input type="checkbox"/> PASSED <input type="checkbox"/> FAILED	
1ST CHECK held in direction of flow _____ PSID (5 PSID or more) <input type="checkbox"/> PASSED <input type="checkbox"/> FAILED	
DIFFERENCE (1st check - relief) _____ PSID (3 PSID or more) <input type="checkbox"/> PASSED <input type="checkbox"/> FAILED	
NOTE: Failure of any of the above items, requires repair.	
<b>FINAL TEST AFTER REPAIR</b>	
REDUCED PRESSURE PRINCIPLE ASSEMBLY: <input type="checkbox"/> PASSED <input type="checkbox"/> FAILED	
RELIEF VALVE OPENED AT _____ PSID (2 PSID or more) <input type="checkbox"/> PASSED <input type="checkbox"/> FAILED	
2ND CHECK held backpressure <input type="checkbox"/> PASSED <input type="checkbox"/> FAILED	
NO. 2 SHUTOFF VALVE leak tight <input type="checkbox"/> PASSED <input type="checkbox"/> FAILED	
1ST CHECK held in direction of flow _____ PSID (5 PSID or more) <input type="checkbox"/> PASSED <input type="checkbox"/> FAILED	
DIFFERENCE (1st check - relief) _____ PSID (3 PSID or more) <input type="checkbox"/> PASSED <input type="checkbox"/> FAILED	
NOTE: Failure of any of the above items, requires repair.	
<b>INITIAL TEST</b>	
DOUBLE CHECK VAVLE ASSEMBLY: <input checked="" type="checkbox"/> PASSED <input type="checkbox"/> FAILED	
1ST CHECK held in direction of flow <i>2.8</i> PSID (1 PSID or more) <input checked="" type="checkbox"/> PASSED <input type="checkbox"/> FAILED	
2ND CHECK held backpressure <input checked="" type="checkbox"/> PASSED <input type="checkbox"/> FAILED	
2ND CHECK held in direction of flow <i>2.4</i> PSID (1 PSID or more) <input checked="" type="checkbox"/> PASSED <input type="checkbox"/> FAILED	
NO. 2 SHUTOFF VALVE leak tight <input checked="" type="checkbox"/> PASSED <input type="checkbox"/> FAILED	
NOTE: Failure of any of the above items, requires repair.	
<b>FINAL TEST AFTER REPAIR</b>	
DOUBLE CHECK VAVLE ASSEMBLY: <input type="checkbox"/> PASSED <input type="checkbox"/> FAILED	
1ST CHECK held in direction of flow _____ PSID (1 PSID or more) <input type="checkbox"/> PASSED <input type="checkbox"/> FAILED	
2ND CHECK held backpressure <input type="checkbox"/> PASSED <input type="checkbox"/> FAILED	
2ND CHECK held in direction of flow _____ PSID (1 PSID or more) <input type="checkbox"/> PASSED <input type="checkbox"/> FAILED	
NO. 2 SHUTOFF VALVE leak tight <input type="checkbox"/> PASSED <input type="checkbox"/> FAILED	
NOTE: Failure of any of the above items, requires repair.	
<b>APPLICATION:</b>	
<input type="checkbox"/> COMMERCIAL	
<input checked="" type="checkbox"/> IRRIGATION	
<input type="checkbox"/> FIRE LINE	
<input type="checkbox"/> FIRE LINE BY-PASS	
**METER # _____	
**METER READ _____	
<input type="checkbox"/> POINT OF USE	
COMMENTS <i>Tested Backflow Working fine</i>	
<b>THE ABOVE REPORT IS CERTIFIED TO BE TRUE, ACCURATE AND COMPLETE</b>	
TESTED BY (PRINT) <i>Daniel J. Porter</i>	(SIGNATURE) <i>[Signature]</i>
REPAIRED BY (PRINT) <i>[Blank]</i>	(SIGNATURE) <i>[Blank]</i>
DATE OF REPAIR <i>12-28-2021</i>	
FINAL TEST BY (PRINT) <i>[Blank]</i>	(SIGNATURE) <i>[Blank]</i>
DATE OF FINAL TEST <i>12-28-2021</i>	
OWNER OR OWNER'S REPRESENTATIVE <i>[Blank]</i>	
DATE <i>12-28-2021</i>	
* If an existing PVB is beyond repair and needs replacement, it should be replaced by a DC or RP to meet current State and City regulations.	
** METER # and METER READ for the fire line by-pass meter on detector assemblies are required.	
Missouri State Regulation 10 CSR 60-11-010(6)(E) requires testers to report results of tests and inspections to the customer and water supplier.	
DISTRIBUTION: WHITE - WATER SUPPLIER CANARY - OWNER	