



LEE'S SUMMIT MISSOURI

Scope of Work Statement

Applicant: <u>Smart Power Services</u>	Contractor <input checked="" type="checkbox"/>	Homeowner <input type="checkbox"/>	Tenant <input type="checkbox"/>
Primary Contact: <u>Andrea</u>	Phone: <u>816-366-0385</u>	Email: <u>accounting@smartpowerkc.com</u>	

Project Address: <u>220 SE Green Street</u>	
Name of Owner: <u>LS Council Chambers</u>	Phone: _____
Residential <input type="checkbox"/>	Commercial <input checked="" type="checkbox"/>

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 type="checkbox"/>	Electrical contractor _____	Plumber (NG?) _____
Lawn irrigation	<input type="checkbox"/>		
Other:	<input checked="" type="checkbox"/>	Cost of project including labor \$ <u>3,865.00</u>	

Detailed description of work:

Add surface-mounted receptacles at screen wall
Route 6 new circuits from existing panel to screen wall at north end of council chambers
Install black 2" pipe from ceiling to top of screen wall.
Route flexible conduit down pipe and inside wooden column down to north side of wall.
Install surface-mounted raceway on north side of wall.
Drill through base of wall at three stair locations and mount surface-mounted receptacle boxes with two duplex receptacles at each location.

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.

Larry Morris

Signature of Applicant

Larry Morris

Printed Name of Applicant

4/25/2022

Date