



# LEE'S SUMMIT MISSOURI

## Scope of Work Statement

Applicant: CONRAD DEVELOPMENT AND CONSTRUCTION LLC. Contractor ☒ Homeowner ☐ Tenant ☐  
 Primary Contact: BRIAN CONRAD Phone: (816) 261-5723 Email: brian2conrad@gmail.com

Project Address: 725 SW 15TH CIRCLE, LEE'S SUMMIT, MO 64081  
 Name of Owner: TERRY AND KELLE BOYER Phone: (816) 716-4203 (KELLE)  
(816) 716-4204 (TERRY)  
 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  $\geq 400$ )  
 HVAC Repair ☐ Replace ☐  
 Uncovered deck: ☐ Covered deck: ☐ Square Feet: \_\_\_\_\_  
 Accessory Structure: ☒ Description: DETACHED GARAGE Square feet 2496  
 Interior Alterations: ☐ Description: \_\_\_\_\_ Square feet \_\_\_\_\_  
 Addition: ☐ Description: \_\_\_\_\_ Square feet \_\_\_\_\_  
 Retaining wall over 48" ☐ TEAGUE  
 Swimming pool ☐ Electrical contractor ELECTRIC Plumber (NG?) \_\_\_\_\_  
 Lawn irrigation ☐  
 Other: ☐ Cost of project including labor \$ \_\_\_\_\_  
 Detailed description of work:

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.

Brian Conrad  
 Signature of Applicant

BRIAN CONRAD  
 Printed Name of Applicant

4/21/2022  
 Date