



# LEE'S SUMMIT MISSOURI

## Scope of Work Statement

Applicant: Automotive Technology, Inc. Contractor Homeowner/Tenant? (Circle one)  
Primary Contact: Doug Slattery Phone: 636-343-8101 Email: Doug@automotivetechnology.com

Project Address: Crest Champions 451 SE Oldham Pkwy 64081  
Name of Owner: \_\_\_\_\_ Phone: 816-524-2133  
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 type="checkbox"/>	Amperage: _____	(Engineer required of $\geq 400$ ) <u>Under separate permit</u>
HVAC repair/replace	<input type="checkbox"/>	<u>Gas line upgrade to 2" - separate permit by Waldinger</u> <u>By Traque Electric</u>	
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 <u>Traque</u>	Plumber (NG?) <u>Waldinger</u>
Lawn irrigation	<input type="checkbox"/>		
Other:	<input type="checkbox"/>	Cost of project including labor \$	

Detailed description of work: Removal of existing Paint Booth and Prep Station.  
Installation of two (2) new GFS paint Booths and a Mixing room (1).  
Fire suppression to be separate permit by Allstate Fire Protection Services.

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.

Doug Slattery  
Signature of Applicant

Doug Slattery  
Printed Name of Applicant

6-10-22  
Date