



**LEE'S SUMMIT**  
MISSOURI

**RE-ROOF APPLICATION**

For Office Use Only:

Contractor: Dave May Contact Name: \_\_\_\_\_  
Address: 1210 SW Jefferson St  
City: Lee's Summit State: MO Zip: 64081  
Phone: 816-305-6309 Email: dave.mayzing@gmail.com

Project Address: 1210 SW Jefferson St Lee's Summit, Mo. 64081  
Name of Owner: Dave May

Indicate type of roof material. Check box of nearest match.

- ☒ Composition/Laminate/3-tab ☐ Metal ☐ Other \_\_\_\_\_  
☐ Concrete, Clay, Slate ☐ Wood (minimum class 'C' fire treated)

If other than a complete tear-off, explain method and describe materials. \_\_\_\_\_

If other than 100% replacement, what percentage of roof will be re-surfaced? 50%

Cost of project including labor: \$ 1500

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.

David L. May  
Signature of Owner or Authorized Agent

David L. May  
Printed Name of Applicant

12-7-22  
Date

Revised 8/23/18

**Development Services**

220 SE Green Street | Lee's Summit, MO 64063 | P: 816.969.1200 | F: 816. 969.1201 | cityofls.net