



LEE'S SUMMIT MISSOURI

Scope of Work Statement

Applicant: RAINTREE LANDSCAPING LLC Contractor/Homeowner/Tenant? (Circle one)

Primary Contact: Tim Jordan Phone: 816-646-9701 Email: tim.jordan@RAINTREELANDSCAPINGLLC.com

Project Address: 1416 Amber St. Ham

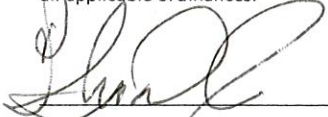
Name of Owner: ~~Kelly & James McEntire~~ Phone: _____

Residential/Commercial? (Circle one) James & Kelly McEntire

- | | | | |
|-----------------------------------|-------------------------------------|------------------------------------|---|
| 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 ≥ 400) |
| HVAC repair/replace | ☐ | | |
| Uncovered deck: | ☐ | Covered deck: | ☐ Square feet: _____ |
| Accessory Structure: | ☐ | Description: _____ | Square feet _____ |
| Interior Alterations: | ☐ | Description: _____ | Square feet _____ |
| Addition: | ☐ | Description: _____ | Square feet _____ |
| Retaining wall over 48" | ☐ | | |
| Swimming pool | ☐ | Electrical contractor _____ | 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.


Signature of Applicant

Timothy D. Sola
Printed Name of Applicant

1-9-23
Date