

Scope of Work Statement

Applicant*: Kevin Higdon Construction					
*Please use licensed business name if applicable					
Primary Contact: Doug Sloter Phone: 816-985-1650 Email: doug@higdonbuilders.com					
906 no Algonquia St					
Project Address: 806 ne Algonquin St Name of Owner: KHC Phone: 816-524-9797					
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■Residential □Comm	Cost of project	Cost of project including labor \$25000.00			
Water service	□Repair	□Replace	□Work in right	of way?	
Sewer service	□Repair	□Replace	☐Work in right of way?		
Electrical service		Replace	Amperage: (Engineer required of \geq 400)		
Accessory Structure	Description: _	ption: Square feet			
Interior Alterations	Description: <u>t</u>	cription: basement finish Square feet 840			
Addition	Description: Square feet				
□Uncovered deck	□Covered deck Deck square footage:				
□Swimming pool	□HVAC Replacement				
☐Lawn Irrigation	□Retaining wall over 48"				
Detailed description of work:					
basement finish					
Licensed contractors used for scope of work to be completed:					
Mechanical: united Electrical: interstate construction services					
Plumbing: miller Structural: na					
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.					
VI					
		kevin higde		12-19-2023	
Signature of Applicant		Printed Name	of Applicant	Date	