



LEE'S SUMMIT MISSOURI

Scope of Work Statement

Applicant: Empire Basement Solutions Contractor Homeowner/Tenant? (Circle one)
Primary Contact: Bob Perry Phone: (816) 405-3065 Email: connect@empireremodelingkc.com

Project Address: 4402 SW Amethyst Dr. Lee's Summit, MO 64082
Name of Owner: Jeff Ferger Phone: 816-332-0281
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 ≥ 400)
HVAC repair/replace	<input type="checkbox"/>		
Uncovered deck:	<input type="checkbox"/>	Covered deck:	<input type="checkbox"/> Square feet: _____
Accessory Structure:	<input type="checkbox"/>	Description: _____	Square feet _____
Interior Alterations:	<input checked="" type="checkbox"/>	Description: _____	Square feet _____
Addition:	<input type="checkbox"/>	Description: <u>Basement White Box Finish</u>	Square feet <u>804</u>
Retaining wall over 48"	<input type="checkbox"/>		
Swimming pool	<input type="checkbox"/>	Electrical contractor <u>TMF Electric</u>	Plumber (NG?) <u>Baldwin Plumbing</u>
Lawn irrigation	<input type="checkbox"/>		
Other:	<input type="checkbox"/>	<u>Mechanical: PRAIRIE CENTER PLUMBING HEATING & AC</u>	

Cost of project including labor \$ 37,923

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.

Pamela D. O'Kane
Signature of Applicant

Pamela D O'Kane
Printed Name of Applicant

03/04/2024
Date

Codes Admin/Forms/Codes/Forms/Scope of Work Statement