

Scope of Work Statement

Applicant*: Contractor DHomeowner Other				
*Please use licensed business name if applicable				
Primary Contact:	Phone: Email:			
			Dhara	
Name of Owner: Phone:				
□Residential □Commercial Cost of project including labor \$				
Water service	□Repair	□Replace	□Work in right of wa	ay?
Sewer service	□Repair	□Replace	□Work in right of wa	ay?
Electrical service	□Repair	□Replace	Amperage:	(Engineer required of ≥ 400)
Accessory Structure	Description:	on: Square feet		
Interior Alterations	Description:	on: Square feet		
Addition	Description:	tion: Square feet		
□Uncovered deck	□Covered deck Deck square footage:			
☐Swimming pool	□HVAC Replacement			
□Lawn Irrigation	□Retaining wall over 48"			
Detailed description of work:				
Licensed contractors used for scope of work to be completed:				
Mechanical: Electrical:				
			uctural:	
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	t	Printed N	ame of Applicant	Date