

LEE'S SUMMIT

MISSOURI

	Scope of Work Statement Permit # PRCom2023 520
Applicant*: STREA	
*Please use licensed Primary Contact:	business name if applicable rown Murphy Phone 310-985-9171 Email: Shawn Mostream Tine build
Project Address: 20 Name of Owner: Re	971 S.E. Shenandort Parkway Lees, Summit MO64063 esidences Blackwell LLC Phone: 816-366-7900
□Residential ⊠ Comm	2 2:00
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)
Accessory Structure	Description: Square feet
Interior Alterations	Description: Square feet
Addition	Description: Square feet
□Uncovered deck	□Covered deck
□Swimming pool	□HVAC Replacement
☐Lawn Irrigation	□Retaining wall over 48"
Detailed description o	CONDUIT + GROUNDING-ADDRESSING DONE BY Elec. Sub.
	CONDUIT + GROUNDING - ADDRESSING DONE BY Elec. Sub.
	LOO AMPS.
	used for scope of work to be completed:
	Electrical: KDM Elec-
Plumbing:	Structural:

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

Shown Murphy Printed Name of Applicant 1-27-2025

Updated 11/2023 Codes Admin/Forms/Codes/Forms/Scope of Work Statement