



LEE'S SUMMIT MISSOURI

Scope of Work Statement

Applicant*: SRS Core Enterprises, Inc. dba Core Electric ☒ Contractor ☐ Homeowner ☐ Other _____

*Please use licensed business name if applicable

Primary Contact: Jason Polallis/Susan Sowerby Phone: 816-882-9859/816-419-7045 Email: info@coreelectrickc.com

Project Address: 305 SW Third Street, Lee's Summit, MO 64063

Name of Owner: _____ Phone: _____

☐ Residential ☒ Commercial Cost of project including labor \$ 1500.00

Water service	<input type="checkbox"/> Repair	<input type="checkbox"/> Replace	<input type="checkbox"/> Work in right of way?
Sewer service	<input type="checkbox"/> Repair	<input type="checkbox"/> Replace	<input type="checkbox"/> Work in right of way?
Electrical service	<input type="checkbox"/> Repair	<input checked="" type="checkbox"/> Replace	Amperage: <u>200</u> (Engineer required of ≥ 400)
Accessory Structure	Description: _____		Square feet _____
Interior Alterations	Description: _____		Square feet _____
Addition	Description: _____		Square feet _____
<input type="checkbox"/> Uncovered deck	<input type="checkbox"/> Covered deck	Deck square footage: _____	
<input type="checkbox"/> Swimming pool	<input type="checkbox"/> HVAC Replacement		
<input type="checkbox"/> Lawn Irrigation	<input type="checkbox"/> Retaining wall over 48"		

Detailed description of work:

New electrical service to supply power to the utility pad for fiber optics use by a communications company.

Licensed contractors used for scope of work to be completed:

Mechanical: _____ Electrical: Kelly West

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.

Susan R. Sowerby
Signature of Applicant

Susan R. Sowerby
Printed Name of Applicant

2/26/2025
Date