



# LEE'S SUMMIT MISSOURI

## Scope of Work Statement

Applicant: THE CHURCH OF CHRIST OF LSMO Contractor/Homeowner/Tenant? (Circle one)  
Primary Contact: MIKE THOMPSON Phone: 816-589-2828 Email: SIRBARKLEY@MSN.COM

Project Address: 201 NW CHIPMAN RD LEE'S SUMMIT MO 64063  
Name of Owner: THE CHURCH OF CHRIST OF LSMO Phone: 816-589-2828  
Residential/Commercial? (Circle one) ZONED RESIDENTIAL

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  $\geq 400$ )  
HVAC repair/replace ☐  
Uncovered deck: ☐ Covered deck: ☐ Square feet: \_\_\_\_\_  
Accessory Structure: ☐ Description: \_\_\_\_\_ Square feet \_\_\_\_\_  
Interior Alterations: ☐ Description: \_\_\_\_\_ Square feet \_\_\_\_\_  
Addition: ☐ Description: \_\_\_\_\_ Square feet \_\_\_\_\_  
Retaining wall over 48" ☐  
Swimming pool ☐ Electrical contractor \_\_\_\_\_ Plumber (NG?) \_\_\_\_\_  
Lawn irrigation ☐  
Other: ☒ Cost of project including labor \$ 40,000.00

Detailed description of work:

REPLACING OUR OLD SIGN WITH A NEW  
SIGN INCLUDING BASE/FOOTING

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]  
Signature of Applicant

MIKE THOMPSON  
Printed Name of Applicant

5/21/2025  
Date