

## **Scope of Work Statement**

Applicant*: Contractor DHomeowner DOther					
*Please use licensed business name if applicable  Primary Contact: Phone: Email:				il:	
Name of Owner: Phone:					
□Residential □Commercial Cost of project including labor \$					
Water service	□Repair	□Replace	□Work in right o	of way?	
Sewer service	□Repair	□Replace	□Work in right of way?		
Electrical service	□Repair	□Replace	Amperage:	(Engineer required of ≥ 400)	
Accessory Structure	Description:	otion: Square feet			
Interior Alterations	Description:	Pescription: Square feet			
Addition	Description:	ription: 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: Ele					
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.					
DAM	J				
Signature of Applican	t	Printed N	Name of Applicant	Date	