



SCOPE OF WORK

Scope of work for (address) _____ Permit # _____

Please list the room type: **Bedroom, Bathrooms, Hall/foyer, Kitchen, Garage, Basement, Porch, Screen rooms**, or specific location where work will be performed after each type of construction types listed below. You may specify areas that will not have changes made as an alternative method to describe the scope of work to be done. List any special changes/work to be done that is not covered below in the Additional information area at the end of the form.

Building - Rooms:

- Re-roof (over existing roof)
- Re-roof (strip to decking)
- Replace roof decking or siding on structure
- Repair existing deck / porch
- Replace existing doors / windows with same size and type
- Upgrade or change size existing doors / windows
- Add new door or windows
- Remove and replace drywall
- Reconfigure existing square footage
- Increase of square footage of structure – conditioned
- Increase of square footage of structure – Non-conditioned
- Add new deck / porch
- Add new shed / storage – no utilities
- Add new workshop / living quarters / accessory space with utilities
- Add new screen enclosure
- Add new pool / water feature
- Change non-conditioned space to habital conditioned space
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Electric - Rooms:

- Replace or repair only existing lights/ outlets
- Add additional new wiring and outlets/switches/lights
- Re-wire entire room
- Add CO2 / smoke detectors
- Add low voltage wiring – Cable TV / Alarm systems
- Service upgrade or relocation
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Plumbing – Rooms:

- Add irrigation system
- Replace plumbing fixtures only, no relocation
- Relocate existing plumbing fixtures
- Add new plumbing fixtures / bathrooms
- Add plumbing water / waste lines
- Repair only existing water / waste lines
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Gas – Rooms:

- Repair / Replace existing gas appliance
- Add new additional gas supply / appliances
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Mechanical – Rooms:

- Replace air handler/ air conditioner only
- Replace only existing duct system
- Add additional duct system / supply or balancing
- Add additional air handler / conditioning systems
- Add / Upgrade insulation to existing structure
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ADDITIONAL INFORMATION _____

Form Prepared by: _____ Date _____