



AUG 07 2015

CITY OF WIMBERLEY EMERGENCY CONTRACTOR CERTIFICATION APPLICATION

CONTRACTOR CLASSIFICATION: (Mark all applicable)

General
 Master Elec.
 Journeyman
 Apprentice
 Plumbing
 Mechanical
 Irrigation
 Septic

Application must be accompanied by the following documents:

- a. A copy of the applicant's valid driver's license
- b. Proof of a General Liability Insurance Policy for an amount not less than \$1,000,000, if the Contractor will be performing a scope of work that exceeds \$2,000
- c. For trade contractors, proof of licensing for their respective trades through the state contractors' licensing agency of the state within which their business is located and proof of any minimum insurance required by the state.
- d. Name and address of the contractor's registered agent (if applicable) *(Not submitted) con*

APPLICANT INFORMATION

Name: Cory A. Cox
 Address: 309 Ripple Rock City: Buda Zip: 78610
 Phone: 512-295-9351 Cell: 512-748-4853
 E-mail: CSDTS@AOL.COM Fax: 512-295-2389
 State License Number: 22615 Expiration: 07/31/2016

COMPANY INFORMATION

Name: Advantage Plumbing Contractors
 Address: P.O. Box 1395 City: Manhaca Zip: 78652
 Phone: Same Cell: Same
 E-mail: Same Fax: Same
 Contractor License Holder: Cory A. Cox

REQUIRED REFERENCES

Provide three (3) references, as shown below, who are competent to judge your experience in the fitness for the occupation in which you seek this certification. No reference may be related to you by consanguinity or affinity, nor may any reference be affiliated with the applicant as a partner, officer, employee, employer or hold any similar position, compensated or non-compensated.

Reference No.1

Name: Mike Crabough Street Address: 402 Corral Ln Phone Number: 512-878-3851
Date Work Performed: Over Several Years
Brief Description of Work: Plumbing Contracting

Reference No.2

Name: Mark Slota Street Address: 410 Mission Trail - Wilberley TX Phone Number: 512-878-3851
Date Work Performed: Over several years
Brief Description of Work: Plumbing Contracting

Reference No.3

Name: Danny Scott Street Address: _____ Phone Number: 512-748-4382
Date Work Performed: Over 10 years
Brief Description of Work: Plumbing Contracting

SITE WORKERS

Provide a list of all agents or employees of the Contractor who will be performing work in the City.

- 1. Cory Cox M 22615
- 2. Mark Brown 1-231
- 3. Israel Gonzalez 2740
- 4. _____
- 5. _____
- 6. _____
- 7. _____
- 8. _____
- 9. _____
- 10. _____

INFORMATION CERTIFICATION

I certify that the information provided in this application is true and correct to the best of my knowledge and belief.

Signed this the 6th day of August, 2015.

Cory Cox
Applicant

TEXAS STATE BOARD OF PLUMBING EXAMINERS

AUSTIN, TEXAS
BE IT KNOWN THAT

CORY ANDREW COX
MASTER
RMP

LICENSE NO.
22615



D.O.B.
EXPIRES
07/31/2016

IS HEREBY LICENSED IN ACCORDANCE WITH CHAPTER 1301, BCC, CODE

THIS LICENSE IS NOT TRANSFERABLE

SIGNATURE *[Signature]*
TEXAS STATE BOARD OF PLUMBING EXAMINERS
[Signature] CHAIR
[Signature] EXECUTIVE DIRECTOR

IN WITNESS WHEREOF, WE HAVE SET OUR HAND AND SEAL
TEXAS STATE BOARD
OF PLUMBING EXAMINERS
929 EAST 41st ST., (ZIP 78751)
P.O. BOX 4200, AUSTIN, TX 78765
FAX (512) 486-8637
OFC (512) 936-5200
www.tsbpe.texas.gov

Texas

DRIVER LICENSE



DL [REDACTED] Class C
Iss 04/24/2015 Exp 04/20/2021
DOB [REDACTED]
COX
CORY ANDREW
309 RIPPLE ROCK LANE
BUDA TX 78610-0000
Restrictions NONE End NONE
Hgt 6-00 Sex M Eyes BRO
DD 08611580142224308080

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