



**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: JOHN URBAN Street Address: WIMBORNE TX Phone Number: 1-832-729-199  
Date Work Performed: 2010  
Brief Description of Work: A COMPLETE INSTALL OF HVAC EQUIP.

**Reference No.2**

Name: STEVE VAN WIENK Street Address: SPICE WOOD Phone Number: 512-970-5525  
Date Work Performed: 2013  
Brief Description of Work: 2 SYS CHANGE OUT

**Reference No.3**

Name: JERRY MULLEY Street Address: ALL OVER AUSTIN Phone Number: (512) 699-5594  
Date Work Performed: WORKED FOR JERRY 20+ YEARS  
Brief Description of Work: REMOVALS / NEW CONST / SERVICE

**SITE WORKERS**

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

1. RICHARD BOCK
2. JOAN SORIANA-
3. CHRIS JOKUSZKO
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_

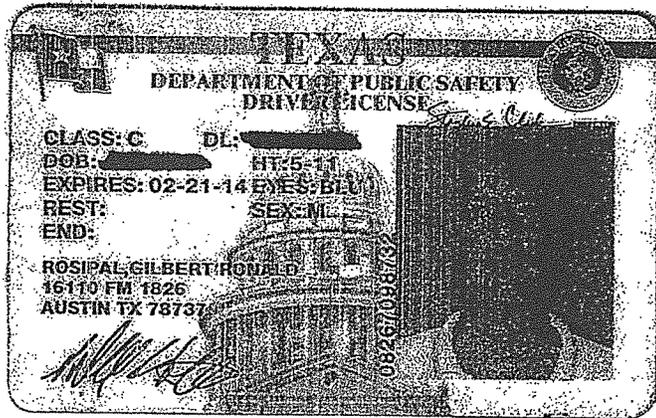
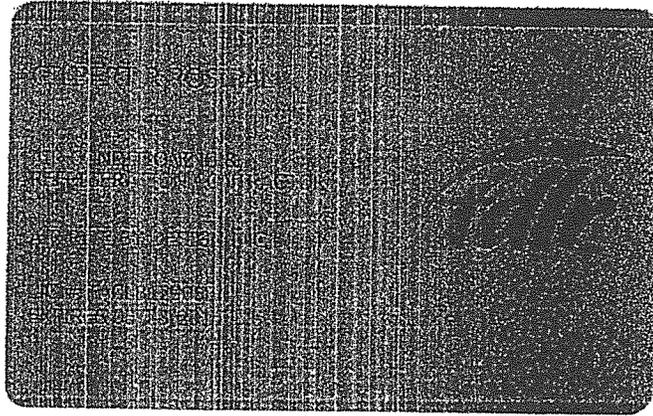
**INFORMATION CERTIFICATION**

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

Signed this the 10 day of JULY, 2015.

[Signature]  
Applicant

See attached  
For Lic #  
From +DOB  
JM



Texas Department of Licensing and Regulation  
Result Listing

Name and Location	Other Information
ROSIPAL, GILBERT R AIR RITE BY DESIGN INC 14400 S GREEN HILLS LOOP AUSTIN TX 78737-9216 County: TRAVIS No DBA found	<b>Air Conditioning/Refrigeration Contractor</b> License #: TACLB00012905E Expiration Date: 05/28/2016 Type: BE Phone: (512) 264-9990

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