

JAN 28 2016

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 copy of the applicant's valid driver's license *(Not submitted) cm*
- 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 *(Not submitted) cm*
- 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. *(Not submitted) cm*
- Name and address of the contractor's registered agent (if applicable) *(Not submitted) cm*

APPLICANT INFORMATION

Name: Carliss Taylor
 Address: 108 Hub Drive City: Wimberley TX Zip: 78676
 Phone: 512-668-3440 Cell: _____
 E-mail: N/A Fax: _____
 State License Number: N/A Expiration: _____

COMPANY INFORMATION

Name: Carliss Taylor (self)
 Address: 108 Hub Drive City: Wimberley TX Zip: 78676
 Phone: _____ Cell: _____
 E-mail: N/A Fax: _____
 Contractor License Holder: N/A

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: N/A Street Address: _____ Phone Number: _____
Date Work Performed: _____
Brief Description of Work: _____

Reference No.2

Name: N/A Street Address: _____ Phone Number: _____
Date Work Performed: _____
Brief Description of Work: _____

Reference No.3

Name: N/A Street Address: _____ Phone Number: _____
Date Work Performed: _____
Brief Description of Work: _____

SITE WORKERS

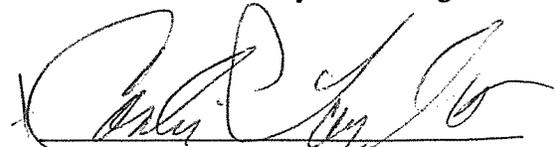
Provide a list of all agents or employees of the Contractor who will be performing work in the City.

1. _____
2. _____
3. _____
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 28 day of January, 2016.


Applicant