

SEP 16 2018

# 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)*

### APPLICANT INFORMATION

Name: Warren Glyn Landrum

Address: 4705 Sendero Dr. City: San Marcos, TX Zip: 78666

Phone: \_\_\_\_\_ Cell: 512-738-0166

E-mail: glandrum@currentelectricweb.com Fax: 512-353-1920

State License Number: 8003 Expiration: 4/4/16

### COMPANY INFORMATION

Name: Current Electric Inc.

Address: P.O. Box 1241 City: San Marcos, TX Zip: 78667

Phone: 512-353-0141 Cell: 512-738-0166

E-mail: glandrum@currentelectricweb.com Fax: 512-353-1920

Contractor License Holder: 18001

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: K-W Construction Street Address: 320 Barnes Dr. Phone Number: 512-353-5100  
Date Work Performed: Jan-2015 - July 2015 and many other projects  
Brief Description of Work: new commercial bldg. - w/ lease spaces  
finish out of their new office.

Reference No.2

Name: Stokes Construction Street Address: P.O. Box 629 Phone Number: 512-353-1900  
Date Work Performed: many various project since prior to 1994  
Brief Description of Work: new offices remodel, Baugh Ranch homes  
restore from floods

Reference No.3

Name: Ron Balderach Architect Street Address: 107 Rogers Ridge Phone Number: 512-426-8494  
Date Work Performed: San Marcos Tx  
Brief Description of Work: Quarry Street Office and Lofts 9/14 - 9/15  
Commercial Office Bldg. | Custom homes

SITE WORKERS

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

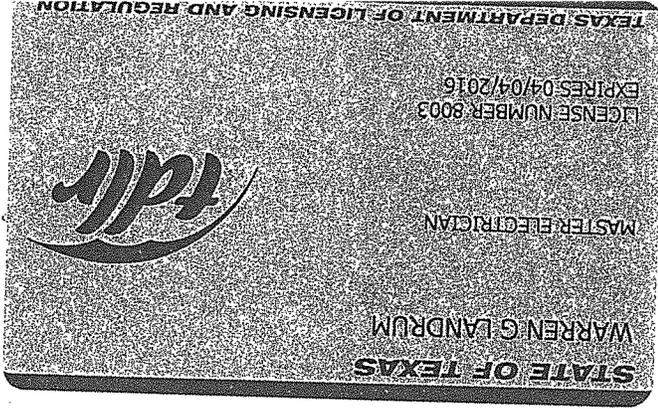
- 1. M. Todd Landrum - Journeyman electrician
- 2. Clint Aron - Journeyman electrician
- 3. Ryan Berket - apprentice electrician
- 4. Bruce Taylor - apprentice electrician
- 5. \_\_\_\_\_
- 6. \_\_\_\_\_
- 7. \_\_\_\_\_
- 8. \_\_\_\_\_
- 9. \_\_\_\_\_
- 10. \_\_\_\_\_

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 15 day of Sept, 2015.

M. Todd Landrum  
Applicant



*Texas*

USA  
TX

**DRIVER LICENSE**

4d DL [REDACTED] 9 Class **C**  
4a Iss **08/01/2013** 4b Exp **08/11/2019**  
3 DOB [REDACTED]  
1 **LANDRUM**  
2 **WARREN GLYN**  
8 **4705 SENDERO DRIVE**  
**SAN MARCOS TX 78666-0000**  
12 Restrictions **NONE** 9a End **NONE**  
16 Hgt **6-00** 15 Sex **M** 18 Eyes **BRO**  
5 DD **16611380184031408728**

*W. G. Landrum*



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
9/4/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER SWBC Insurance-Austin 9811 S. IH 35, Bldg 1 Suite 100 Austin TX 78744	CONTACT NAME: Connie Briones	
	PHONE (A/C No. Ext): E-MAIL ADDRESS: certificate.team@swbc.com	
INSURED Current Electric, Inc.; Voltata LLC 1108 Lavaca St. #110-496 Austin TX 7866778701	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: Cincinnati Insurance Company	10677
	INSURER B: Texas Mutual Insurance Co.	22945
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES CERTIFICATE NUMBER: 15/16 Master REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY			EPP0065008	3/1/2015	3/1/2016	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$ 10,000
							PERSONAL & ADV INJURY \$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE \$ 2,000,000
	<input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC						PRODUCTS - COM/OP AGG \$ 2,000,000
A	AUTOMOBILE LIABILITY			EPP0065008	3/1/2015	3/1/2016	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> HIRED AUTOS	<input checked="" type="checkbox"/> NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident) \$
							\$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB			EPP0065008	3/1/2015	3/1/2016	EACH OCCURRENCE \$ 5,000,000
	<input type="checkbox"/> EXCESS LIAB	<input checked="" type="checkbox"/> OCCUR					AGGREGATE \$ 5,000,000
	<input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ -0-	<input type="checkbox"/> CLAIMS-MADE					\$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			TSF001188436	3/1/2015	3/1/2016	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		N/A				E.L. EACH ACCIDENT \$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
							E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	Installation Floater			EPP0065008	3/1/2015	3/1/2016	Maximum Per Location 200,000
	Contractors Equipment			EPP0065008	3/1/2015	3/1/2016	Rented & Leased 50,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
 General Liability and Auto Liability include a blanket automatic additional insured endorsement which provides additional insured status to the certificate holder only when there is a written contract between the named insured and the certificate holder which requires such status. General Liability policy contains a special endorsement with "Primary and Non-contributory" wording. General Liability, Auto Liability and Workers' Compensation include a blanket automatic Waiver of Subrogation endorsement only when there is a written contract between the named insured and the certificate holder which requires it.

CERTIFICATE HOLDER  City of Wimberley 221 Stillwater Drive Wimberley, TX 78676	CANCELLATION  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE  Gary Dudley/DELPHI <i>Gary Dudley</i>