



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. *(Not submitted) CW*
- d. Name and address of the contractor's registered agent (if applicable)

APPLICANT INFORMATION

Name: Grady Burnette
 Address: 991 Anderson Ridge City: Wimberley Zip: 78676
 Phone: 512-847-9040 Cell: 512-748-3753
 E-mail: grady@burnettebuilders.com Fax: 512-847-5247
 State License Number: _____ Expiration: _____

COMPANY INFORMATION

Name: Grady Burnette Builders
 Address: 284 Old Kyle Rd City: Wimberley Zip: 78676
 Phone: 512-847-9040 Cell: 512-748-3753
 E-mail: grady@burnettebuilders.com Fax: 512-847-5247
 Contractor License Holder: _____

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: Moore Supply Street Address: P.O. Box 973109 Phone Number: 512-396-4111
Date Work Performed: _____
Brief Description of Work: _____

Reference No.2

Name: CW Electrical Street Address: P.O. Box 1394 Phone Number: 210-326-5656
Date Work Performed: _____
Brief Description of Work: _____

Reference No.3

Name: McCoy's Street Address: P.O. Box 1362 Phone Number: 512-396-1785
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. Zach Dewell
- 2. Buck Burnette
- 3. _____
- 4. All others will be sub contractors & vendors
- 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 6 day of July, 2015.

[Signature]
Applicant

Texas

USA
TX

DRIVER LICENSE

IDENTIFICATION



4d DL [REDACTED] 9 Class C
4a Iss 10/03/2013 4b Exp 07/25/2019
3 DOB [REDACTED]
1 BURNETTE
2 GRADY FORREST
8 991 ANDERSON RIDGE
WIMBERLEY TX 78676-0000
12 Restrictions NONE 9a End NONE
16 Hgt 6-03 15 Sex M 18 Eyes BRO
5 DD 49619381008053338958

AK