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

### APPLICANT INFORMATION

Name: KEVIN HECKEL

Address: 235 CEDAR HOLLOW City: WIMBERLEY Zip: 78676

Phone: 512 963 9838 Cell: \_\_\_\_\_

E-mail: HECKEL KEVIN @ YAHOO.COM Fax: \_\_\_\_\_

State License Number: N/A Expiration: \_\_\_\_\_

### COMPANY INFORMATION

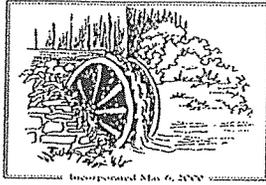
Name: HECKEL BUILT CONSTRUCTION

Address: 235 CEDAR HOLLOW City: WIMBERLEY Zip: 78676

Phone: 512 963 9838 Cell: \_\_\_\_\_

E-mail: HECKEL KEVIN @ YAHOO.COM Fax: N/A

Contractor License Holder: N/A



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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: TOM CARBUZZESE Street Address: 61 REDGROVE CIR Phone Number: 912 847 9129  
Date Work Performed: JULY 2014  
Brief Description of Work: MAXIMUM REMOVAL NEW FLOORING IN BRN ROOMS IN APART & STAIR EXTERIOR

#### Reference No.2

Name: JEFF WHITE Street Address: 2816 WITZ RD Phone Number: 580-222-9599  
Date Work Performed: OCTOBER 2015  
Brief Description of Work: REMOVED GARAGE INTO ENTERTAINMENT AREA AND CABIN ROOM

#### Reference No.3

Name: JARNA ROBINSON Street Address: 2 COUNTRY PLACE Phone Number: 912 657 1731  
Date Work Performed: APRIL 2016  
Brief Description of Work: MAXIMUM REMOVAL

### SITE WORKERS

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

1. CHARGE INSULATION
2. CUSTOM PLUMBING
3. INS AIR
4. PIPER ELECTRICAL
5. ORDE JARAMELLO TELL
6. MIGUEL ESPARZA DAYWALL & FRAMING
7. FRANCISCO OLFSON PAINT
8. GRANT OSBORN WOODWORK
9. LEANN WILSON CLEANING
10. CHIVEN HUTCHENSUN TRIM

### 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 30<sup>TH</sup> day of MAY, 2016.

\_\_\_\_\_  
Applicant

Texas

USA  
TX

DRIVER LICENSE



4d DL [REDACTED] 9 Class **C**  
4a Iss **05/12/2015** 4b Exp **04/05/2020**

3 DOB [REDACTED]  
1 **HECKEL**  
2 **KEVIN LANE**

8 **235 CEDAR HOLLOW**  
**WIMBERLEY TX 78676**

*Kevin Heckel*

12 Restrictions **NONE** 9a End **NONE**  
16 Hgt **5-08** 15 Sex **M** 18 Eyes **HAZ**  
5 DD **20619580055112088048**

