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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 -N/A
- 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)

APPLICANT INFORMATION

Name: Carl Kenneweber
Address: P.O. Box 1983 City: Wimberley Zip: 78676
Phone: _____ Cell: 512 748 7937
E-mail: _____ Fax: _____
State License Number: 12725 Expiration: 11-30-2016

COMPANY INFORMATION

Name: Kenneweber Plumbing Co.
Address: PO Box 1983 City: Wimberley Zip: 78676
Phone: _____ Cell: 512-748-7937
E-mail: _____ Fax: _____
Contractor License Holder: Carl Kenneweber

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: NA Street Address: _____ Phone Number: _____
Date Work Performed: _____
Brief Description of Work: _____

Reference No.2

Name: NA Street Address: _____ Phone Number: _____
Date Work Performed: _____
Brief Description of Work: _____

Reference No.3

Name: NA 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 18 day of Nov, 2015.



Applicant

Texas

DRIVER LICENSE



1d. DL. [REDACTED] 9. Class **C**

14. Iss. **09/13/2011** 15. Exp. **11/04/2017**

3. DOB [REDACTED]

2. LEINNEWEBER
LLOYD CARL

8. 1000 WAYSIDE DR
WIMBERLEY TX 78676-0000

12. Restrictions **A**

16. Hgt **6-04** 15. Sex **M** 9a. End. **NONE**

5. DD 10611180099123148438 18. Eyes **BRO**

USA
TX

TEXAS STATE BOARD OF PLUMBING EXAMINERS

CARL LEINNEWEBER

MASTER

RMP

LICENSE NO. **12725**

D.O.B. [REDACTED]

EXPIRES **11/30/2016**



6. Licensed Plumber with License No. 12725

