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DEC 10 2015
BY:

CITY OF WIMBERLEY
EMERGENCY CONTRACTOR CERTIFICATION APPLICATION

CONTRACTOR CLASSIFICATION: *(Mark all applicable)*

X 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 CARRIED (HAVE APPLIED FOR) (Not submitted) CM

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) CM

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

APPLICANT INFORMATION

Name: ROBERT W WARNER

Address: 5307 LOOKOUT MOUNTAIN DR. City: HOUSTON, TX. Zip: 77069

Phone: 281-797-7635 Cell: 281-797-7635

E-mail [redacted] Fax: N/A

State License Number: NONE Expiration:

COMPANY INFORMATION

Name: LET'S CALL BOB

Address: 5307 LOOKOUT MOUNTAIN DR. City: HOUSTON Zip: 77069

Phone: 281-797-7635 Cell: 281-797-7635

E-mail [redacted] Fax:

Contractor License Holder: NONE

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: CHRIS CONRAD Street Address: 5215 GREYSTONE HOUSTON, TX 77069 Phone Number: 281-630-567
Date Work Performed: 2012, 2013, 2014, 2015
Brief Description of Work: SIDING REPAIR, PAINTING, SHEETROCK REPAIR, INSALATION OF WOOD FLOORING, MANY INSTALLS FOR THEIR BUSINESS, DINOSAUR PLASTICS, HISD, UNIVERSITY OF HOUS SIGNING FOR FIRE & BUILDING SIGNS.

Reference No.2

Name: MATT SWANSON Street Address: 7503 BRINKWORTH Phone Number: 281 468 2921
Date Work Performed: 2012, 2014, 2015
Brief Description of Work: SIDING, CABINETS, DRYWALL REPAIR PAINTING, GENERAL MAINTENANCE OF BUSINESS. (SWANSON GOLF CENTER)

Reference No.3

Name: LYN SALARNO Street Address: 742 LAKESHORE DR SUGAR LAND TX Phone Number: 281-494 3292
Date Work Performed: 2011, 2012, 2013, 2014, 2015
Brief Description of Work: BATH REMODEL, DRYWALL REPAIR, PAINTING, GENERAL MAINTENANCE OF HOME, PLUMBING INSTALATIONS TOILET, FAUCETS.

SITE WORKERS

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

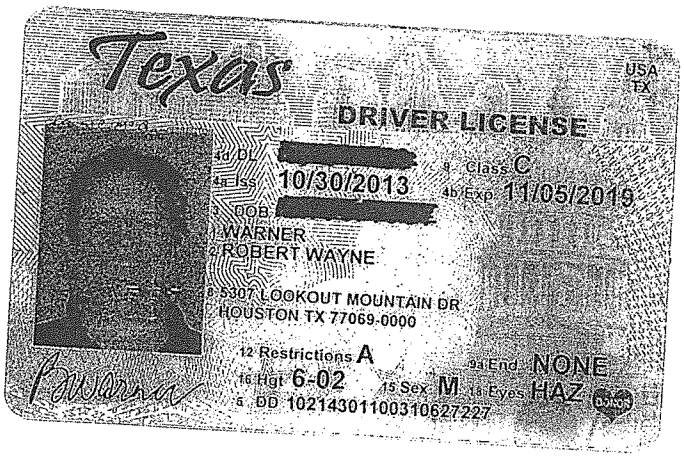
1. GREGORIO CARBAJAL
2. WILLIAM CASTILLO
3. JOHN GLAZE
4. JESSIE WILLIAMS
5. FRANSICO LOPEZ
6.
7.
8.
9.
10.

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 30 day of NOVEMBER, 2015.

Applicant



Texas

USA
TX

DRIVER LICENSE

4d DL [redacted]
9 Class C
4a Iss 10/30/2013
4b Exp 11/05/2019
3 DOB [redacted]
1 WARNER
2 ROBERT WAYNE
8 5307 LOOKOUT MOUNTAIN DR
HOUSTON TX 77069-0000
12 Restrictions A
9a End NONE
16 Hgt 6-02
15 Sex M
18 Eyes HAZ
5 DD 10214301100310627227