



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

APPLICANT INFORMATION

Name: MICHAEL DAVID BROWN
Address: 150 DOBIE DR. City: WIMBERLEY Zip: 78676
Phone: 512-517-8230 Cell: 512-517-8230
E-mail: DBMITIERRACLAD@GMAIL.COM Fax: _____
State License Number: _____ Expiration: _____

COMPANY INFORMATION

Name: MI TIERRA CONSTRUCTION LANDSCAPE AND DESIGN
Address: 150 DOBIE DR. City: WIMBERLEY Zip: 78676
Phone: 512-517-8230 Cell: 512-517-8230
E-mail: dbmitierraclad.com Website: mitierraclad.com
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: Daniel Bisset Street Address: _____ Phone Number: 512-667-075
Date Work Performed: _____
Brief Description of Work: ~~Flight Acres Wimberley~~ ~~Fireplace repair~~
Box Canyon Wimberley Tx 78676 Ranch Fence

Reference No.2

Name: Theresa Graves Street Address: _____ Phone Number: 713-252-6623
Date Work Performed: _____
Brief Description of Work: Flight Acres Wimberly Tx. Fireplace repair

Reference No.3

Name: Carlos Green Street Address: _____ Phone Number: 413-209-2552
Date Work Performed: _____
Brief Description of Work: Mystic Shores Canyon Lake Tx
Landscaping and tree trimming

SITE WORKERS

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

- 1. SEAN LANGLY
- 2. _____
- 3. Alfredo Cruz
- 4. _____
- 5. Carlos Martiencz
- 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 Aug day of 4, 2015.

D3

Applicant

RECEIVED
AUG 13 2015
BY: _____

Texas DRIVER LICENSE

USA TX

02/22/2012 09/25/2015 Class C

DOB [REDACTED]

1 BROWN
2 MICHAEL DAVID

8 160 DOBIE DR
WIMBERLEY TX 78675-0000

12 Restrictions NONE 13 End NONE
16 Hgt 5-08 15 Sex M 18 Eyes HAZ
5 DD 27611280124252788658



