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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 *(Not submitted) cm* ✓
- 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: Roy E ALBERTSON - REA ELEC. INC.

Address: 1091 CORD 1442 City: WIMB TX Zip: 78676

Phone: 512 847 2663 Cell: 512-393 9904

E-mail: _____ Fax: 512 847 2663

State License Number: MAS # 51126 Expiration: JUNE 26 - 16

COMPANY INFORMATION

Name: REA ELECTRIC INC

Address: 1091 CORD 1442 City: WIMB TX Zip: 78676

Phone: 512 847 2663 Cell: 512 393-9904

E-mail: _____ Fax: 512 847 2663

Contractor License Holder: Roy E ALBERTSON # 19396

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: ACE HARDWARE Street Address: SATLER TX Phone Number: _____
Date Work Performed: _____
Brief Description of Work: WIRED BUILDING

Reference No.2

Name: ST STEPHENS SCH Street Address: KYLE HWY Phone Number: _____
Date Work Performed: WIRED BUILDING
Brief Description of Work: GEN WIRING

Reference No.3

Name: REBAR INTP Street Address: 2325 Phone Number: 847 9215
Date Work Performed: _____
Brief Description of Work: CON SEPTIC SYSTEMS

SITE WORKERS

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

1. GARRIO ALBERTSON
2. _____
3. CHRIS ALBERTSON
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 25 day of AUG, 2015.

Roy E. Albertson
Applicant