

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: _____ Street Address: _____ Phone Number: _____

Date Work Performed: _____

Brief Description of Work: _____

Reference No.2

Name: _____ Street Address: _____ Phone Number: _____

Date Work Performed: _____

Brief Description of Work: _____

Reference No.3

Name: _____ 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. NONE
- 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 5th day of July, 2015.

Robert Gay
Applicant

COMPANY INFORMATION

Texas

Robert Gay



der:

DRIVER LICENSE

9 Class C
4b Exp 01/25/2020

01/24/2014

[Redacted]

4d DL
4e Iss

1 GAY
2 ROBERT GLEN

8 630 NORTHPORT LANE
KEMAH TX 77565-0000

12 Restrictions A

16 Hgt 5-08
5 DD 04212490114204387435
16 Sex M
16 Eyes BRO



NONE

USA TX