



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

### APPLICANT INFORMATION

Name: MARTY WALKER  
 Address: 29 PALOS VERDES City: WIM Zip: 78676  
 Phone: 512-751-2937 Cell: 512-751-2937  
 E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_  
 State License Number: 27920 Expiration: 2/25/16

### COMPANY INFORMATION

Name: WALKER ELECTRIC  
 Address: 29 PALOS VERDES City: WIM Zip: 78676  
 Phone: 512-751-2937 Cell: \_\_\_\_\_  
 E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Contractor License Holder: MARTY WALKER

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. NICOLAS WINDLE
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 4 day of Nov, 2015.

  
Applicant

Texas

DRIVER LICENSE

USA TX



4d DL

4a Iss

3 DOB

1 WALKER

2 MARTIN DAMON

8 29 PALOS VERDES

WIMBERLEY TX 78676-0000

01/18/2012

9 Class C

4b Exp 01/19/2018

12 Restrictions NONE

16 Hgt 5-08

15 Sex M

5 DD 07/6/128013138488878

3aa End NONE

18 Eyes BLU

18 Eyes BLU

