

# Council Meeting May 28, 2024

## NEW BUSINESS LICENSES

	<b>BUSINESS NAME</b>	<b>FIRE INSPECTION</b>	<b>INSURANCE</b>
1	DB Equipment, LLC.	Yes	NA
2	DISA Technologies, Inc.	Yes	NA
3	Ervin Enterprises	Yes	NA
4	Gordon's Rents	Yes	NA
5	Gordon's Rents Chapman	Yes	NA
6	Wyoming Longhorn Landscaping, Inc.	Yes	NA
7	Wyoming Machinery Company	Yes	NA

## RENEWAL BUSINESS LICENSES

	<b>BUSINESS NAME</b>	<b>FIRE INSPECTION</b>	<b>INSURANCE</b>
1	Amerigas	Yes	NA
2	Artistic Hairstyling	Yes	NA
3	Chuck's Auto Repair Service	Yes	NA
4	Dollar General Store #23300	Yes	NA
5	Ferguson Enterprises	Yes	NA
6	Homax #8	Yes	NA
7	Key Energy Services, LLC.	Yes	NA
8	Kindel Concrete	Yes	NA
9	Motion Industries	Yes	NA
10	Blitzed Again Welding Services	NA	NA



**CITY OF MILLS**  
EST. 1921

RECEIVED

MAY 15 2021

**APPLICATION FOR  
Business License**

*A Business License is required for ANY business to operate within the City of Mills, a Business License Application must be completed. Incomplete applications shall be returned.*

License #: 9874

Date: 5-14-24

New Business     Change of Ownership     Change of Location     Renewal     Expired

GENERAL INFORMATION

Name of Business: DB Equipment LLC

Physical Address: 687 N. Robertson Rd Unit 1A Chaper WY 82604  
Street City State Zip

Mailing Address: Box 530 Mills WY 82644  
Street City State Zip

Business Phone Number: 307-462-4548 WY Tax ID Number: RESALE # 1013556

Email Address: office@dbequipmentllc.com Website: FIN # 99-0725821

Description of Business: Service & Sales Pressure Washer

APPLICANT INFORMATION

Applicant Name: Donna Froman Phone Number: 307-462-4548

Mailing Address: Box 530 Mills WY 82644  
Street City State Zip

I certify that the above information is correct and true to the best of my knowledge.

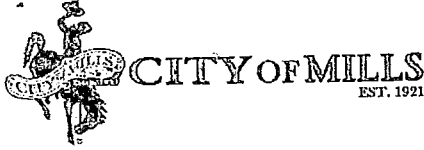
Applicants Signature: Donna Froman

There will be a fire inspection fee to be paid at the time the License is issued.

Businesses that qualify for a Self-Assessment Fire Inspection	\$45.00
Businesses between 1-5,000 Sq. Feet	<u>\$75.00</u>
Businesses between 5,001-10,000 Sq. Feet	\$125.00
Businesses greater than 10,000 Sq. Feet	\$250.00
Businesses with Fire Alarm, Sprinkler System or Hood Suppression	+ \$50.00

Return completed form to:  
Mills City Hall  
720 4<sup>th</sup> Street  
307-234-6679

**OFFICE USE ONLY**  
This license was / was not  
Granted at a meeting of the Mills  
City Council on the \_\_\_\_\_  
Attest \_\_\_\_\_



**APPLICATION FOR  
Business License**

*A Business License is required for ANY business to operate within the City of Mills, a Business License Application must be completed. Incomplete applications shall be returned.*

License #: 1132

Date: 5/16/24

- New Business
- Change of Ownership
- Change of Location
- Renewal
- Expired

GENERAL INFORMATION

Name of Business: Motion Industries

Physical Address: 146 Progress Circle Mills Wy 82644  
Street City State Zip

Mailing Address: PO Box 100 Mills WY 82644  
Street City State Zip

Business Phone Number: 307-266-2966 WY Tax ID Number: 63-0251578

Email Address: roger.huschka@motion.com Website: \_\_\_\_\_

Description of Business: Bearing and assc sales

APPLICANT INFORMATION

Applicant Name: Roger Huschka Phone Number: 307-266-2966

Mailing Address: PO Box 100 Mills Wy 82644  
Street City State Zip

**I certify that the above information is correct and true to the best of my knowledge.**

Applicants Signature: R Huschka

**There will be a fire inspection fee to be paid at the time the License is issued.**

*Partial  
5/16/24*

Businesses that qualify for a Self-Assessment Fire Inspection	\$45.00
Businesses between 1-5,000 Sq. Feet	\$75.00
Businesses between 5,001-10,000 Sq. Feet	<u>\$125.00</u>
Businesses greater than 10,000 Sq. Feet	\$250.00
Businesses with Fire Alarm, Sprinkler System or Hood Suppression	+ \$50.00

Return completed form to:  
Mills City Hall  
720 4<sup>th</sup> Street  
307-234-6679

<b>OFFICE USE ONLY</b> This license was / was not Granted at a meeting of the Mills City Council on the _____ Attest _____
--



**CITY OF MILLS**  
EST. 1921

RECEIVED

MAY 10 2024

**APPLICATION FOR  
Business License**

*A Business License is required for ANY business to operate within the City of Mills, a Business License Application must be completed. Incomplete applications shall be returned.*

License #: 91036

Date: 5/10/24

New Business     Change of Ownership     Change of Location     Renewal     Expired

PAID

MAY 10 2024

GENERAL INFORMATION

Name of Business: Kindel Concrete

Physical Address: 296 Van Horn Mills Wy  
Street City State Zip

Mailing Address: PO Box 51551 Casper Wy 82605  
Street City State Zip

Business Phone Number: 307 577 6062 WY Tax ID Number: \_\_\_\_\_

Email Address: kindelconcrete@gmail.com Website: \_\_\_\_\_

Description of Business: \_\_\_\_\_

APPLICANT INFORMATION

Applicant Name: Wade Kindel Phone Number: 307 259 7529

Mailing Address: P.O. Box 51551 Casper Wy 82605  
Street City State Zip

I certify that the above information is correct and true to the best of my knowledge.

Applicants Signature: \_\_\_\_\_

**There will be a fire inspection fee to be paid at the time the permit is issued.**

- Businesses that qualify for a Self-Assessment Fire Inspection \$45.00
- Businesses between 1-5,000 Sq. Feet  \$75.00
- Businesses between 5,001-10,000 Sq. Feet \$125.00
- Businesses greater than 10,000 Sq. Feet \$250.00

Return completed form to:  
Mills City Hall  
720 4<sup>th</sup> Street  
307-234-6679

<b>OFFICE USE ONLY</b>
This license was / was not
Granted at a meeting of the Mills
City Council on the _____
Attest _____

License # 1114

# Application for Business License - City of Mills

DATE 10/24/23

Incomplete Applications will be returned. Complete all fields in RED



I, Brian See, the District Manager of Key Energy Services, LLC  
NAME TITLE (i.e. owner, manager, etc.) BUSINESS NAME (as it will appear on the license)

located at 1102 Falcon Avenue, Mills WY 82644  
BUSINESS PHYSICAL STREET ADDRESS CITY, STATE, ZIP

- New
- Renewal
- Expired

**RECEIVED**

Fire Inspection \$250.<sup>00</sup>  
Inspection fee due after fire inspection

OCT 25 2023

do hereby apply to the City Council of the City of Mills for a Business License to operate my  
Oil & Gas Field Services Business within the City of Mills for a  
DESCRIBE THE TYPE OF BUSINESS

period of ONE year, beginning the 1st day of November, 2023

Business mailing address: PO Box 1599  
City Mills State WY Zip 82644

Business phone number: (307) 577-6184 WY Tax ID Number: 20-8125567

- Do you travel in and out of Mills, WY for your Business?  YES  NO
- Do you have any type of equipment, trucks, cars, trailers, materials, etc. that will be parked at your business location in Mills, WY?  YES  NO If YES, how many? 25
- Does your business operate out of a commercial building?  YES  NO
- Does your business operate out of a residential home?  YES  NO
- Is your business mobile (i.e. Taxi, Handyman, Construction, etc.)?  YES  NO

Signed Brian See Print Name Brian See

**Fee is to be PAID before license is approved**

A business license is required for ANY business to operate within the City of Mills. If your main location is not in Mills, but you come into Mills to sell, or to perform a service, a license is required. Please call the Fire Department at 307-439-1246 if you have any questions. To schedule your Fire Inspection call 307.234.8481.

OFFICE USE ONLY

Fire Inspection Completed Date: 10/18/23

**PAID**  
MAY 21 2024

**\*\*\* All door to door sales operating hours are limited to 8:00 A.M. to 8:00 P.M.\*\*\***

**OFFICE USE ONLY**

I, \_\_\_\_\_, City Clerk of the City of Mills Wyoming, do hereby certify that the above license was read, examined and was / was not granted at a regular meeting of the City Council held on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Attest \_\_\_\_\_  
City Clerk

RECEIVED

APPLICATION FOR Business License

MAY 14 2024



A Business License is required for ANY business to operate within the City of Mills, a Business License Application must be completed. Incomplete applications shall be returned.

License #: 9702

Date: 5-10-24

- checkbox New Business, checkbox Change of Ownership, checkbox Change of Location, checked checkbox Renewal, checkbox Expired

PAID

MAY 14 2024

GENERAL INFORMATION

Name of Business: Homax #88
Physical Address: 5070 W Yellowstone Mills WY 82404
Mailing Address: 1005 S Poplar Casper WY 82401
Business Phone Number: 307-333-4163 WY Tax ID Number: 83-0240102
Email Address: jhomer@homaxoil.com Website: www.homaxoil.com
Description of Business: convenience / retail / gas station

APPLICANT INFORMATION

Applicant Name: Homax #88 Phone Number: 307-237-5800
Mailing Address: 1005 S Poplar Casper WY 82401

I certify that the above information is correct and true to the best of my knowledge.

Applicants Signature: [Handwritten Signature]

There will be a fire inspection fee to be paid at the time the License is issued.

Table with 2 columns: Business type and Fee amount. Rows include Self-Assessment Fire Inspection (\$45.00), 1-5,000 Sq. Feet (\$75.00), 5,001-10,000 Sq. Feet (\$125.00), greater than 10,000 Sq. Feet (\$250.00), and Fire Alarm/Suppression (+ \$50.00).

Return completed form to: Mills City Hall, 720 4th Street, 307-234-6679

OFFICE USE ONLY
This license was / was not
Granted at a meeting of the Mills
City Council on the
Attest

# Application for Business License - City of Mills

DATE 1/25/2024

License # 899

Incomplete Applications will be returned. **Complete all fields in RED**



I, Susan Cox, the Tax Manager of Ferguson Enterprises  
NAME TITLE (i.e. owner, manager, etc.) BUSINESS NAME (as it will appear on the license)

located at 3327 W Yellowstone Hwy Mills, WY 82604  
BUSINESS PHYSICAL STREET ADDRESS CITY, STATE, ZIP

- New
- Renewal
- Expired
- Fire Inspection \$
- Inspection fee due after fire inspection

do hereby apply to the City Council of the City of Mills for a Business License to operate my

Wholesale distribution of plumbing/HVAC products

within the City of Mills for a

DESCRIBE THE TYPE OF BUSINESS

period of ONE year, beginning the 1<sup>st</sup> day of April, 2024

Business mailing address: 251, Little Falls Drive  
City Wilmington State DE Zip 19808

Business phone number: 757-874-7795 WY Tax ID Number: 25003087

- Do you travel in and out of Mills, WY for your Business?  YES  NO
- Do you have any type of equipment, trucks, cars, trailers, materials, etc. that will be parked at your business location in Mills, WY?  YES  NO If YES, how many? 3
- Does your business operate out of a commercial building?  YES  NO
- Does your business operate out of a residential home?  YES  NO
- Is your business mobile (i.e. Taxi, Handyman, Construction, etc.)?  YES  NO

Signed: [Signature] Print Name Susan Cox

**Fee is to be PAID before license is approved**

A business license is required for ANY business to operate within the City of Mills. If your main location is not in Mills, but you come into Mills to sell, or to perform a service, a license is required. Please call the Fire Department at 307-439-1246 if you have any questions. To schedule your Fire Inspection call 307-234-8481.

OFFICE USE ONLY

Fire Inspection Completed Date: 4/19/2024

*Paid  
5/22/24*

**\*\*\* All door to door sales operating hours are limited to 8:00 A.M. to 8:00 P.M.\*\*\***

### OFFICE USE ONLY

I, \_\_\_\_\_, City Clerk of the City of Mills Wyoming, do hereby certify that the above license was read, examined and was / was not granted at a regular meeting of the City Council held on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Attest \_\_\_\_\_  
City Clerk



**APPLICATION FOR  
Business License**

*A Business License is required for ANY business to operate within the City of Mills, a Business License Application must be completed. Incomplete applications shall be returned.*

License #: 9788

Date: 5/24/24

- New Business
- Change of Ownership
- Change of Location
- Renewal
- Expired

GENERAL INFORMATION

Name of Business: DOLLAR GENERAL STORE #23300

Physical Address: 4570 W YELLOWSTONE HWY, CASPER WY 82604  
Street City State Zip

Mailing Address: 100 MISSION RIDGE GOODLETTSVILLE TN 37072  
Street City State Zip

Business Phone Number: 307-285-9108 WY Tax ID Number: 2208-9934

Email Address: TAX-BEERANDWINELICENSE@DOLLARGENERAL.COM Website: www.dollargeneral.com

Description of Business: Retail- General Merchandise

APPLICANT INFORMATION

Applicant Name: Aaron Parker Phone Number: 615-855-4000

Mailing Address: 100 MISSION RIDGE GOODLETTSVILLE TN 37072  
Street City State Zip

**I certify that the above information is correct and true to the best of my knowledge.**

Applicants Signature: *ap*

**There will be a fire inspection fee to be paid at the time the License is issued.**

Businesses that qualify for a Self-Assessment Fire Inspection	\$45.00
Businesses between 1-5,000 Sq. Feet	\$75.00
Businesses between 5,001-10,000 Sq. Feet	\$125.00
Businesses greater than 10,000 Sq. Feet	<u>\$250.00</u>
Businesses with Fire Alarm, Sprinkler System or Hood Suppression	+ \$50.00

Return completed form to:  
Mills City Hall  
720 4<sup>th</sup> Street  
307-234-6679

<b>OFFICE USE ONLY</b> This license was / was not Granted at a meeting of the Mills City Council on the _____ Attest _____
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License # 9413

# Application for Business License - City of Mills

DATE 5-1-24

Incomplete Applications will be returned. Complete all fields in RED



I, Charles Morris, the owner of Chuck's Auto Repair Service  
NAME TITLE (i.e. owner, manager, etc.) BUSINESS NAME (as it will appear on the license)

located at \_\_\_\_\_ CITY, STATE, ZIP

BUSINESS PHYSICAL STREET ADDRESS

RECEIVED

MAY 10 2024

- New
- Renewal
- Expired

- Fire Inspection \$
- Inspection fee due after fire inspection

PAID  
MAY 13 2024

do hereby apply to the City Council of the City of Mills for a Business License to operate my

Automotive Repair Business within the City of Mills for a  
DESCRIBE THE TYPE OF BUSINESS

period of ONE year, beginning the 1st day of May, 2024

Business mailing address: PO Box 2146  
City Mills State WY Zip 82644

Business phone number: 307-265-0209 WY Tax ID Number: \_\_\_\_\_

- Do you travel in and out of Mills, WY for your Business?  YES  NO
- Do you have any type of equipment, trucks, cars, trailers, materials, etc. that will be parked at your business location in Mills, WY?  YES  NO If YES, how many? \_\_\_\_\_
- Does your business operate out of a commercial building?  YES  NO
- Does your business operate out of a residential home?  YES  NO
- Is your business mobile (i.e. Taxi, Handyman, Construction, etc.)?  YES  NO

Signed Charles G. Morris Print Name Charles G. Morris

**Fee is to be PAID before license is approved**

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OFFICE USE ONLY

Fire Inspection Completed Date: 4/30/24

\*\*\*All door to door sales operating hours are limited to 8:00 A.M. to 8:00 P.M.\*\*\*

OFFICE USE ONLY

I, \_\_\_\_\_, City Clerk of the City of Mills Wyoming, do hereby certify that the above license was read, examined and was / was not granted at a regular meeting of the City Council held on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Attest \_\_\_\_\_  
City Clerk

A Business License is required for ANY business to operate within the City of Mills, a Business License Application must be completed. Incomplete applications shall be returned.

License #: 958  
Date: 5-16-24

- New Business     Change of Ownership     Change of Location     Renewal  
 Expired

GENERAL INFORMATION

Name of Business: Artistic Hair Styling

Physical Address: 4660 W. Yellowstone Mills  
Street City

State WY Zip 82604

Mailing Address: 4660 W. Yellowstone Mills  
Street City

State WY Zip 82604

Business Phone Number: 307-234-7233 WY Tax ID Number: N/A

Email Address: Sed362003@yahoo.com Website: \_\_\_\_\_

Description of Business: Beauty Salon

APPLICANT INFORMATION

Applicant Name: Sandra Daniels Phone Number: 234-7233 / 724-2001

Mailing Address: 4660 West Yellowstone Mills  
Street City

State WY Zip 82604

I certify that the above information is correct and true to the best of my knowledge.

Applicants Signature: Sandra Daniels

There will be a fire inspection fee to be paid at the time the License is issued.

Businesses that qualify for a Self-Assessment Fire Inspection \$45.00  
Businesses between 1-5,000 Sq. Feet \$75.00

License # 850

# Application for Business License - City of Mills

DATE 12/26/23

Incomplete Applications will be returned. Complete all fields in RED



I, David Debolt, the Territory Manager of Amerigas  
NAME TITLE (i.e. owner, manager, etc.) BUSINESS NAME (as it will appear on the license)

located at 3401 W Yellowstone Hwy Mills, WY 82644  
BUSINESS PHYSICAL STREET ADDRESS CITY, STATE, ZIP

- New
- Renewal
- Expired
- Fire Inspection \$
- Inspection fee due after fire inspection

**PAID**  
MAR 26 2024

do hereby apply to the City Council of the City of Mills for a Business License to operate my  
Propane Provider within the City of Mills for a  
DESCRIBE THE TYPE OF BUSINESS

period of ONE year, beginning the 1st day of February, 2024

Business mailing address: 49 W Kovi  
City Sheridan State WY Zip 82801

Business phone number: 307-235-1021 WY Tax ID Number: 23-2786294

- Do you travel in and out of Mills, WY for your Business?  YES  NO
- Do you have any type of equipment, trucks, cars, trailers, materials, etc. that will be parked at your business location in Mills, WY?  YES  NO If YES, how many? 8
- Does your business operate out of a commercial building?  YES  NO
- Does your business operate out of a residential home?  YES  NO
- Is your business mobile (i.e. Taxi, Handyman, Construction, etc.)?  YES  NO

Signed [Signature] Print Name DAVID DEBOLT

**Fee is to be PAID before license is approved**

A business license is required for ANY business to operate within the City of Mills. If your main location is not in Mills, but you come into Mills to sell, or to perform a service, a license is required. Please call the Fire Department at 307-439-1246 if you have any questions. To schedule your Fire Inspection call 307.234.8481.

OFFICE USE ONLY

Fire Inspection Completed Date: 3/23/24

\*\*\*All door to door sales operating hours are limited to 8:00 A.M. to 8:00 P.M.\*\*\*

### OFFICE USE ONLY

I, \_\_\_\_\_, City Clerk of the City of Mills Wyoming, do hereby certify that the above license was read, examined and was / was not granted at a regular meeting of the City Council held on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Attest \_\_\_\_\_  
City Clerk

License # 987U

# Application for Business License - City of Mills

DATE 9/21/2023

Incomplete Applications will be returned. Complete all fields in RED



I, Lane Sorensen, the Director of Finance of Wyoming Machinery Company  
NAME TITLE (i.e. owner, manager, etc.) BUSINESS NAME (as it will appear on the license)

located at 5300 West Old Yellowstone Hwy, Casper, WY 82604  
BUSINESS PHYSICAL STREET ADDRESS CITY, STATE, ZIP

- New
- Renewal
- Expired

## RECEIVED

Fire Inspection \$  
Inspection fee due after fire inspection

SEP 21 2023

I hereby apply to the City Council of the City of Mills for a Business License to operate my  
Equipment sales and service within the City of Mills for a

DESCRIBE THE TYPE OF BUSINESS

period of ONE year, beginning the 1st day of May, 2024

Business mailing address: PO Box 2335  
Casper City WY State 82602 Zip

Business phone number: 307-472-1000 WY Tax ID Number: 87-0217645

- Do you travel in and out of Mills, WY for your Business?  YES  NO
- Do you have any type of equipment, trucks, cars, trailers, materials, etc. that will be parked at your business location in Mills, WY?  YES  NO If YES, how many? Commercial lot
- Does your business operate out of a commercial building?  YES  NO
- Does your business operate out of a residential home?  YES  NO
- Is your business mobile (i.e. Taxi, Handyman, Construction, etc.)?  YES  NO

Signed [Signature] Print Name Lane Sorensen

**Fee is to be PAID before license is approved**

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OFFICE USE ONLY

Fire Inspection Completed Date: 5/16/24

PAID  
MAR 15 2024

**\*\*\* All door to door sales operating hours are limited to 8:00 A.M. to 8:00 P.M.\*\*\***

**OFFICE USE ONLY**

I, \_\_\_\_\_, City Clerk of the City of Mills Wyoming, do hereby certify that the above license was read, examined and was / was not granted at a regular meeting of the City Council held on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Attest \_\_\_\_\_  
City Clerk

license # 0875

# Application for Business License - City of Mills

DATE 12/5/2023

Incomplete Applications will be returned. Complete all fields in RED



I, Ty Werges, the Owner of Wyoming Longhorn Landscaping Inc.  
NAME TITLE (i.e. owner, manager, etc.) BUSINESS NAME (as it will appear on the license)

located at 4885 Oregon Trail Rd Mills, WY, 82604  
BUSINESS PHYSICAL STREET ADDRESS CITY, STATE, ZIP

- New
- Renewal
- Expired
- Fire Inspection \$
- Inspection fee due after fire inspection

PAID  
MAY 22 2024

do hereby apply to the City Council of the City of Mills for a Business License to operate my

Landscaping within the City of Mills for a  
DESCRIBE THE TYPE OF BUSINESS

period of ONE year, beginning the 5<sup>th</sup> day of December, 2023

**\*\*\* All door to door sales  
operating hours are limited  
to 8:00 A.M. to 8:00 P.M.\*\*\***

Business mailing address: 301 Thelma Dr. #185  
City Casper State WY Zip 82609

**OFFICE USE ONLY**

I, \_\_\_\_\_, City Clerk of  
the City of Mills Wyoming, do hereby certify that  
the above license was read, examined and was  
/ was not granted at a regular meeting of the  
City Council held on the \_\_\_\_\_ day of  
\_\_\_\_\_, 20\_\_.

Attest \_\_\_\_\_  
City Clerk

Business phone number: 307-315-8807 WY Tax ID Number: \_\_\_\_\_

Do you travel in and out of Mills, WY for your Business?  YES  NO

Do you have any type of equipment, trucks, cars, trailers, materials, etc. that will be parked at your  
business location in Mills, WY?  YES  NO If YES, how many? 12+/-

Does your business operate out of a commercial building?  YES  NO

Does your business operate out of a residential home?  YES  NO

Is your business mobile (i.e. Taxi, Handyman, Construction, etc.)?  YES  NO

Signed [Signature] Print Name Ty Werges

**Fee is to be PAID before license is approved**

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OFFICE USE ONLY

Fire Inspection Completed Date: 2/26/24

License # 9884

02-056 Application for Business License - City of Mills

FF0000 DATE 2/13/24

Incomplete Applications will be returned. **Complete all fields in RED**



Gordon Milne, the

Owner of

Gordon's Rents

NAME

TITLE (i.e. owner, manager, etc.)

BUSINESS NAME (as it will appear on the license)

located at

5800 Chapman Pl. Mills, WY 82644

BUSINESS PHYSICAL STREET ADDRESS

CITY, STATE, ZIP

New

Renewal

Expired

**RECEIVED**

FEB 13 2024

Fire Inspection \$

**PAID**

MAY 20 2024

do hereby apply to the City Council of the City of Mills for a Business License to operate my

Rental Equipment

DESCRIBE THE TYPE OF BUSINESS

within the City of Mills for a

period of ONE year, beginning the 13<sup>th</sup> day of February, 2024

Business mailing address: 1531 E. Burlington Ave

City Casper

State WY

Zip 82601

Business phone number: 307-237-3442 WY Tax ID Number: 01012458

Do you travel in and out of Mills, WY for your Business?  YES  NO

Do you have any type of equipment, trucks, cars, trailers, materials, etc. that will be parked at your business location in Mills, WY?  YES  NO If YES, how many? 5-8

Does your business operate out of a commercial building?  YES  NO

Does your business operate out of a residential home?  YES  NO

Is your business mobile (i.e. Taxi, Handyman, Construction, etc.)?  YES  NO

Signed

Print Name Kimberly McMillen

**Fee is to be PAID before license is approved**

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Please call the Fire Department at 307-439-1246 if you have any questions. To schedule your Fire Inspection call 307.234.8481.

OFFICE USE ONLY

**OFFICE USE ONLY**

I, \_\_\_\_\_, City

Clerk of the City of Mills Wyoming, do hereby

certify that the above license was read,

examined and was / was not granted at a

regular meeting of the City Council held on

the \_\_\_\_\_ day of

\_\_\_\_\_, 20\_\_.

Attest

City Clerk

2-13-24 5:42 PM KJ

2/12/24

License # 9883

02-056 Application for Business License - City of Mills

FF0000 DATE 2/13/24

Incomplete Applications will be returned. **Complete all fields in RED**



Gordon Milne, the Owner of Gordon's Rents  
NAME TITLE (i.e. owner, manager, etc.) BUSINESS NAME (as it will appear on the license)

located at 4155 W. Poison Spider Rd Mills WY 82614  
BUSINESS PHYSICAL STREET ADDRESS CITY, STATE, ZIP

**RECEIVED**

*will pay want this one as limit of \$*

- New
- Renewal
- Expired

FEB 13 2024

Fire Inspection

**PAID**  
MAY 20 2024

9-13-24 E. Mill Dept. 1003

do hereby apply to the City Council of the City of Mills for a Business License to operate my Retail/Rental Services within the City of Mills for a DESCRIBE THE TYPE OF BUSINESS

period of ONE year, beginning the 13<sup>th</sup> day of February, 2024

Business mailing address: 1531 E. Burlington Ave  
City Casper State WY Zip 82601  
Business phone number: 307-237-3442 WY Tax ID Number: 01012458

- Do you travel in and out of Mills, WY for your Business?  YES  NO
- Do you have any type of equipment, trucks, cars, trailers, materials, etc. that will be parked at your business location in Mills, WY?  YES  NO If YES, how many? 20+
- Does your business operate out of a commercial building?  YES  NO
- Does your business operate out of a residential home?  YES  NO
- Is your business mobile (i.e. Taxi, Handyman, Construction, etc.)?  YES  NO ?

Signed [Signature] Print Name Kimberly McMullen

**Fee is to be PAID before license is approved**

A business license is required for ANY business to operate within the City of Mills. If your main location is not in Mills, but you come into Mills to sell, or to perform a service, a license is required. Please call the Fire Department at 307-439-1246 if you have any questions. To schedule your Fire Inspection call 307.234.8481.

OFFICE USE ONLY

**\*\*\*All door to door sales operating hours are limited to 8:00 A.M. to 8:00 P.M.\*\*\***

**OFFICE USE ONLY**

I, \_\_\_\_\_, City Clerk of the City of Mills Wyoming, do hereby certify that the above license was read, examined and was / was not granted at a regular meeting of the City Council held on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Attest \_\_\_\_\_  
City Clerk

2/13/24

License # 9882

02-056 Application for Business License - City of Mills

FF0000 DATE 2/12/24

Incomplete Applications will be returned. **Complete all fields in RED**



Ervin Andujar, the owner of Ervin Enterprises  
NAME TITLE (i.e. owner, manager, etc.) BUSINESS NAME (as it will appear on the license)

located at 4155 W. Poison Spider Rd. Mills, 82604  
BUSINESS PHONE NUMBER CITY, STATE, ZIP

PAID  
MAY 20 2024

New FEB 13 2024  
 Renewal  Fire Inspection \$

do hereby apply to the City Council of the City of Mills for a Business License to operate my  
Fabrication within the City of Mills for a  
DESCRIBE THE TYPE OF BUSINESS

**\*\*\* All door to door sales  
operating hours are limited to  
8:00 A.M. to 8:00 P.M.\*\*\***

period of ONE year, beginning the 13<sup>th</sup> day of February, 2024

Business mailing address: 4155 W. Poison Spider Rd.  
City MILLS State WY Zip 82604  
Business phone number: 307.251-8204 WY Tax ID Number:

**OFFICE USE ONLY**  
I, \_\_\_\_\_, City  
Clerk of the City of Mills Wyoming, do hereby  
certify that the above license was read,  
examined and was / was not granted at a  
regular meeting of the City Council held on  
the \_\_\_\_\_ day of  
\_\_\_\_\_, 20\_\_.  
Attest  
\_\_\_\_\_  
City Clerk

Do you travel in and out of Mills, WY for your Business?  YES  NO  
Do you have any type of equipment, trucks, cars, trailers, materials, etc. that will be parked at  
your business location in Mills, WY?  YES  NO If YES, how many? 2  
Does your business operate out of a commercial building?  YES  NO  
Does your business operate out of a residential home?  YES  NO  
Is your business mobile (i.e. Taxi, Handyman, Construction, etc.)?  YES  NO  
Signed Ervin Andujar Print Name ERVIN ANDUJAR

**Fee is to be PAID before license is approved**

A business license is required for ANY business to operate within the City of Mills.  
If your main location is not in Mills, but you come into Mills to sell, or to perform a  
service, a license is required.  
Please call the Fire Department at 307-439-1246 if you have any questions. To  
schedule your Fire Inspection call 307.234.8481.

OFFICE USE ONLY  
2/12/24

8-13-2019 10:00 AM





**CITY OF MILLS**  
EST. 1921

PAID

MAY 07 2024

**APPLICATION FOR  
Business License**

*A Business License is required for ANY business to operate within the City of Mills, a Business License Application must be completed. Incomplete applications shall be returned.*

License #: 9877

Date: 5/7/2024

New Business     Change of Ownership     Change of Location     Renewal     Expired

GENERAL INFORMATION

Name of Business: DISA TECHNOLOGIES, INC.

Physical Address: 1010 FALCON AVE. MILLS NY 82644  
Street City State Zip

Mailing Address: P.O. BOX 1846 MILLS NY 82644  
Street City State Zip

Business Phone Number: (307) - 200 - 8882 WY Tax ID Number: 87-3397813

Email Address: maddie@disausa.com Website: disausa.com

Description of Business: DISA UTILIZES PATENTED LIBERATION TECHNOLOGY TO ISOLATE TARGET MINERALS.

APPLICANT INFORMATION

Applicant Name: MADELYN HORNING Phone Number: 307-262-905

Mailing Address: P.O. BOX 1846 MILLS NY 82644  
Street City State Zip

**I certify that the above information is correct and true to the best of my knowledge.**

Applicants Signature: Maddie Horning

**There will be a fire inspection fee to be paid at the time the License is issued.**

Businesses that qualify for a Self-Assessment Fire Inspection	\$45.00
Businesses between 1-5,000 Sq. Feet	\$75.00
Businesses between 5,001-10,000 Sq. Feet	\$125.00
Businesses greater than 10,000 Sq. Feet	<u>\$250.00</u> Per Wil
Businesses with Fire Alarm, Sprinkler System or Hood Suppression	+ \$50.00

Return completed form to:  
Mills City Hall  
720 4th Street  
307-234-6679

<p><b>OFFICE USE ONLY</b> This license was / was not Granted at a meeting of the Mills City Council on the _____ Attest _____</p>
---

# Application for Business License - City of Mills

DATE 3/13/2024

License # 9730

Incomplete Applications will be returned. Complete all fields in RED



I, Travis Cross, the Owner of Blitzed Again Welding Service

NAME TITLE (i.e. owner, manager, etc.) BUSINESS NAME (as it will appear on the license)

located at 4961 Maxman St Mills WY 82644

BUSINESS PHYSICAL STREET ADDRESS CITY, STATE, ZIP

- New
- Renewal
- Expired

65.00  
 Fire Inspection \$  
 Inspection fee due after fire inspection

**PAID**  
MAY 23 2024

I hereby apply to the City Council of the City of Mills for a Business License to operate my

Welding within the City of Mills for a DESCRIBE THE TYPE OF BUSINESS

period of ONE year, beginning the 1st day of December, 2023

business mailing address: PO Box 1943  
City Mills State WY Zip 82644

business phone number: 307 3155711 WY Tax ID Number: \_\_\_\_\_

- Do you travel in and out of Mills, WY for your Business?  YES  NO
- Do you have any type of equipment, trucks, cars, trailers, materials, etc. that will be parked at your business location in Mills, WY?  YES  NO If YES, how many? \_\_\_\_\_
- Does your business operate out of a commercial building?  YES  NO
- Does your business operate out of a residential home?  YES  NO
- Is your business mobile (i.e. Taxi, Handyman, Construction, etc.)?  YES  NO

Signed \_\_\_\_\_ Print Name Travis Cross

**Fee is to be PAID before license is approved**

A business license is required for ANY business to operate within the City of Mills. If your main location is not in Mills, but you come into Mills to sell, or to perform a service, a license is required. Please call the Fire Department at 307-439-1246 if you have any questions. To schedule your Fire Inspection call 307.234.8481.

\*\*\* All door to door sales operating hours are limited to 8:00 A.M. to 8:00 P.M.\*\*\*

**OFFICE USE ONLY**

I, \_\_\_\_\_, City Clerk of the City of Mills Wyoming, do hereby certify that the above license was read, examined and was  was not granted at a regular meeting of the City Council held on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Attest \_\_\_\_\_  
City Clerk

OFFICE USE ONLY  
Fire Inspection Completed Date: N/A

# Council Meeting May 28, 2024

## NEW CONTRACTOR LICENSES

	<b>BUSINESS NAME</b>	<b>CONTRACTOR ID</b>	<b>INSURANCE</b>	<b>FIRE</b>
1	4T Contracting	No	NA	NA
2	Oil City Concrete	No	NA	NA
3	Tactical Xteriors	Yes	NA	NA

## RENEWAL CONTRACTOR LICENSES

	<b>BUSINESS NAME</b>	<b>CONTRACTOR ID</b>	<b>INSURANCE</b>	<b>FIRE</b>
1	AC Electric of Casper	Yes	NA	NA
2	American Plumbing and Heating	Yes	NA	NA
3	Barns by Design, LLC.	Yes	NA	NA
4	Breit Roofing, LLC.	Yes	NA	NA
5	Colling Brothers Roofing, LLC.	Yes	NA	NA
6	Eldean Inc. DBA/Huber Plumbing & Heating	Yes	NA	NA
7	JTL Group, Inc. DBA/ Knife River	Yes	NA	NA
8	Limmer Roofing, Inc.	Yes	NA	NA
9	Randy L. Day DBA/ Day Enterprises	Yes	NA	NA
10	River Valley Builders, Inc.	Yes	NA	NA
11	Summit Electric, LLC.	Yes	NA	NA



# APPLICATION FOR Contractor License

A Contractor License is required for ANY Contractor doing work within the City of Mills, a Contractor's License Application must be completed. Incomplete applications shall be returned.

License #: 9104

Date: 5/13/24

New License     Renewal License     Expired License

### GENERAL INFORMATION

Name of Business: Summit Electric LLC

Physical Address: 490 Foster Rd Casper WY 82601  
Street City State Zip

Mailing Address: same as above  
Street City State Zip

Business Phone Number: 307-877-1131 Cell Number: \_\_\_\_\_

Email Address: SummitElectric05@yahoo.com Website: \_\_\_\_\_

License Classifications: Electrician

### LICENSE ISSUED BY

City of Mills     City of Casper     Natrona County     State of Wyoming     Other

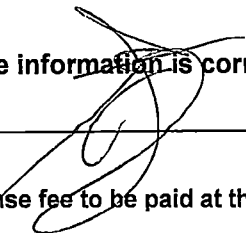
A copy of all licenses must be attached to this application

### APPLICANT INFORMATION

Applicant Name: Kristina Glasgow Phone Number: 297 5972

Mailing Address: 490 Foster Rd Casper WY 82601  
Street City State Zip

I certify that the above information is correct and true to the best of my knowledge.

Applicants Signature: 

There will be a \$35.00 License fee to be paid at the time the license is issued

Return completed form to:  
Mills City Hall  
720 4<sup>th</sup> Street  
307-234-6679

**OFFICE USE ONLY**  
This license was / was not  
Granted at a meeting of the Mills  
City Council on the \_\_\_\_\_  
Attest \_\_\_\_\_

RECEIVED

MAY 13 2024

# APPLICATION FOR Contractor License



A Contractor License is required for ANY Contractor doing work within the City of Mills, a Contractor's License Application must be completed. Incomplete applications shall be returned.

License #: 9440

Date: 5/8/2024

New License     Renewal License     Expired License

PAID  
MAY 10 2024

### GENERAL INFORMATION

Name of Business: River Valley Builders, Inc

Physical Address: 11010 East F Street Casper WY 82609  
Street City State Zip

Mailing Address: Same as above  
Street City State Zip

Business Phone Number: 307-265-1071 Cell Number: \_\_\_\_\_

Email Address: \_\_\_\_\_ Website: \_\_\_\_\_

License Classifications: \_\_\_\_\_

### LICENSE ISSUED BY

City of Mills     City of Casper     Natrona County     State of Wyoming     Other

A copy of all licenses must be attached to this application

### APPLICANT INFORMATION

Applicant Name: John Lance, Owner Phone Number: \_\_\_\_\_

Mailing Address: 11010 East F Street Casper WY 82601  
Street City State Zip

I certify that the above information is correct and true to the best of my knowledge.

Applicants Signature: [Signature]

There will be a \$35.00 License fee to be paid at the time the license is issued

Return completed form to:  
Mills City Hall  
720 4th Street  
307-234-6679

OFFICE USE ONLY  
This license was / was not  
Granted at a meeting of the Mills  
City Council on the \_\_\_\_\_  
Attest \_\_\_\_\_



**CITY OF MILLS**  
EST. 1921

RECEIVED  
MAY 20 2024

**APPLICATION FOR  
Contractor License**

*A Contractor License is required for ANY Contractor doing work within the City of Mills, a Contractor's License Application must be completed. Incomplete applications shall be returned.*

License #: 980

Date: 5-20-24

New License     Renewal License     Expired License

GENERAL INFORMATION

Name of Business: Randy L. Day dba Day Enterprises

Physical Address: 821 Badger Lane    Mills    WY    82644  
Street    City    State    Zip

Mailing Address: P.O. Box 456    Mills    WY    82644  
Street    City    State    Zip

Business Phone Number: 307-259-9312    Cell Number: \_\_\_\_\_

Email Address: dayent2015@gmail.com    Website: \_\_\_\_\_

License Classifications: General Contractor III

LICENSE ISSUED BY

City of Mills     City of Casper     Natrona County     State of Wyoming     Other  
*A copy of all licenses must be attached to this application*

APPLICANT INFORMATION

Applicant Name: Randy L. Day    Phone Number: 307-259-9312

Mailing Address: P.O. Box 456    Mills    WY    82644  
Street    City    State    Zip

**I certify that the above information is correct and true to the best of my knowledge.**

Applicants Signature: Randy L. Day

There will be a \$35.00 License fee to be paid at the time the license is issued

**PAID**  
MAY 20 2024

Return completed form to:  
Mills City Hall  
720 4<sup>th</sup> Street  
307-234-6679

**OFFICE USE ONLY**  
This license was / was not  
Granted at a meeting of the Mills  
City Council on the \_\_\_\_\_  
Attest \_\_\_\_\_



RECEIVED  
MAY 10 2024

# APPLICATION FOR Contractor License

A Contractor License is required for ANY Contractor doing work within the City of Mills, a Contractor's License Application must be completed. Incomplete applications shall be returned.

License #: 962

Date: 5/9/24

New License     Renewal License     Expired License

PAID  
MAY 10 2024

### GENERAL INFORMATION

Name of Business: Limmer Roofing INC

Physical Address: 5590 W. Yellowstone Casper WY 82604  
Street City State Zip

Mailing Address: P.O. Box 1496 mills WY 82644  
Street City State Zip

Business Phone Number: 237-4189 Cell Number: 259-5027

Email Address: tje.limmerroofing.com Website: limmerroofing.com

License Classifications: See attached

### LICENSE ISSUED BY

City of Mills     City of Casper     Natrona County     State of Wyoming     Other

A copy of all licenses must be attached to this application

### APPLICANT INFORMATION

Applicant Name: Terry R Limmer Jr Phone Number: 237-4189

Mailing Address: P.O. Box 1496 mills WY 82644  
Street City State Zip

I certify that the above information is correct and true to the best of my knowledge.

Applicants Signature: Terry R Limmer Jr

There will be a \$35.00 License fee to be paid at the time the license is issued

Return completed form to:  
Mills City Hall  
720 4<sup>th</sup> Street  
307-234-6679

OFFICE USE ONLY  
This license was / was not  
Granted at a meeting of the Mills  
City Council on the \_\_\_\_\_  
Attest \_\_\_\_\_



**CITY OF MILLS**  
EST. 1921

RECEIVED  
MAY 13 2024

**APPLICATION FOR  
Contractor License**

A Contractor License is required for ANY Contractor doing work within the City of Mills, a Contractor's License Application must be completed. Incomplete applications shall be returned.

License #: 9121

Date: 05/13/2024

New License     Renewal License     Expired License

**PAID**

MAY 14 2024

GENERAL INFORMATION

Name of Business: JTL Group, Inc. DBA Knife River

Physical Address: 1461 Bryan Stock Trail Casper WY 82601  
Street City State Zip

Mailing Address: PO Box 730 Casper WY 82602  
Street City State Zip

Business Phone Number: 307-237-9346 Cell Number: \_\_\_\_\_

Email Address: April.Cotton@kniferiver.com Website: \_\_\_\_\_

License Classifications: Construction Business

LICENSE ISSUED BY

City of Mills     City of Casper     Natrona County     State of Wyoming     Other

*A copy of all licenses must be attached to this application*

APPLICANT INFORMATION

Applicant Name: Knife River Phone Number: 307-439-7312

Mailing Address: PO Box 730 Casper WY 82602  
Street City State Zip

**I certify that the above information is correct and true to the best of my knowledge.**

Applicants Signature: April Cotton

There will be a \$35.00 License fee to be paid at the time the license is issued

Return completed form to:  
Mills City Hall  
720 4th Street  
307-234-6679

**OFFICE USE ONLY**  
This license was / was not  
Granted at a meeting of the Mills  
City Council on the \_\_\_\_\_  
Attest \_\_\_\_\_





**CITY OF MILLS**  
EST. 1921

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### APPLICATION FOR Contractor License

**A Contractor License is required for ANY Contractor doing work within the City of Mills, a Contractor's License Application must be completed. Incomplete applications shall be returned.**

License #: 9431

Date: 5/8/24

New License     Renewal License     Expired License

**PAID**

MAY 13 2024

GENERAL INFORMATION

Name of Business: ELDEAN INC dba Huber Plumbing & Heating

Physical Address: 902 East A Street    Casper    WY    82601  
Street    City    State    Zip

Mailing Address: same  
Street    City    State    Zip

Business Phone Number: 307-234-3851    Cell Number: \_\_\_\_\_

Email Address: huberplum@gmail.com    Website: www.plumbingcasper.com

License Classifications: \_\_\_\_\_

LICENSE ISSUED BY

City of Mills     City of Casper     Natrona County     State of Wyoming     Other

*A copy of all licenses must be attached to this application*

APPLICANT INFORMATION

Applicant Name: Huber Plumbing and Heating    Phone Number: 307-234-3851

Mailing Address: 902 East A ST    Casper    WY    82601  
Street    City    State    Zip

**I certify that the above information is correct and true to the best of my knowledge.**

Applicants Signature: [Signature]

**There will be a \$35.00 License fee to be paid at the time the license is issued**

Return completed form to:  
Mills City Hall  
720 4<sup>th</sup> Street  
307-234-6679

**OFFICE USE ONLY**  
*This license was / was not  
Granted at a meeting of the Mills  
City Council on the \_\_\_\_\_*  
Attest \_\_\_\_\_



# APPLICATION FOR Contractor License

A Contractor License is required for ANY Contractor doing work within the City of Mills, a Contractor's License Application must be completed. Incomplete applications shall be returned.

License #: 9754

Date: 5-13-24

New License     Renewal License     Expired License

### GENERAL INFORMATION

Name of Business: Colling Brothers Roofing LLC

Physical Address: 733 W 13th Casper WY 82604  
Street City State Zip

Mailing Address: P.O. Box 50405 Casper WY 82605  
Street City State Zip

Business Phone Number: 307-472-3098 Cell Number: 307-262-4028

Email Address: cbroot@icloud.com Website: \_\_\_\_\_

License Classifications: Roofing

### LICENSE ISSUED BY

City of Mills     City of Casper     Natrona County     State of Wyoming     Other  
A copy of all licenses must be attached to this application

### APPLICANT INFORMATION

Applicant Name: PATRICK Colling Phone Number: 262-4028

Mailing Address: 820 Recluse Ct Casper WY 82609  
Street City State Zip

I certify that the above information is correct and true to the best of my knowledge.

Applicants Signature: Patrick Colling

There will be a \$35.00 License fee to be paid at the time the license is issued

Return completed form to:  
Mills City Hall  
720 4th Street  
307-234-6679

OFFICE USE ONLY  
This license was / was not  
Granted at a meeting of the Mills  
City Council on the \_\_\_\_\_  
Attest \_\_\_\_\_



**CITY OF MILLS**  
EST. 1921

# APPLICATION FOR Contractor License

A Contractor License is required for ANY Contractor doing work within the City of Mills, a Contractor's License Application must be completed. Incomplete applications shall be returned.

License #: 9699

Date: 5/15/24

New License     Renewal License     Expired License

*Paid by  
check  
5/16/24*

### GENERAL INFORMATION

Name of Business: Breit Roofing LLC.

Physical Address: 1340 Nottingham Drive Casper WY 82609  
Street City State Zip

Mailing Address: P.O. Box 50832 Casper WY 82605  
Street City State Zip

Business Phone Number: (307) 337-5207 Cell Number: (307) 337-5220

Email Address: natebreite@gmail.com Website: www.breitroofing.com

License Classifications: Roofing - General

### LICENSE ISSUED BY

City of Mills     City of Casper     Natrona County     State of Wyoming     Other  
*A copy of all licenses must be attached to this application*

### APPLICANT INFORMATION

Applicant Name: Nathan Breit Phone Number: (307) 337-5207

Mailing Address: P.O. Box 50832 Casper WY 82605  
Street City State Zip

I certify that the above information is correct and true to the best of my knowledge.

Applicants Signature:

There will be a \$35.00 License fee to be paid at the time the license is issued

Return completed form to:  
Mills City Hall  
720 4<sup>th</sup> Street  
307-234-6679

**OFFICE USE ONLY**  
This license was / was not  
Granted at a meeting of the Mills  
City Council on the \_\_\_\_\_  
Attest \_\_\_\_\_



CITY OF MILLS  
EST. 1921

RECEIVED

MAY 15 2024

**APPLICATION FOR  
Contractor License**

A Contractor License is required for ANY Contractor doing work within the City of Mills, a Contractor's License Application must be completed. Incomplete applications shall be returned.

License #: 91002

Date: 5-9-24

New License     Renewal License     Expired License

PAID

MAY 15 2024

GENERAL INFORMATION

Name of Business: Barns by Design, LLC

Physical Address: 1720 Jafer Rd Casper WY 82601  
Street City State Zip

Mailing Address: 1720 Jafer Rd Casper WY 82601  
Street City State Zip

Business Phone Number: 307-797-3309 Cell Number: 307-797-5244

Email Address: barnsbydesignwyl@aol.com Website: \_\_\_\_\_

License Classifications: Construction Business

LICENSE ISSUED BY

City of Mills     City of Casper     Natrona County     State of Wyoming     Other

*A copy of all licenses must be attached to this application*

APPLICANT INFORMATION

Applicant Name: Chance Matula Phone Number: 307-797-5244

Mailing Address: 233 Sunflower St. Casper WY 82604  
Street City State Zip

I certify that the above information is correct and true to the best of my knowledge.

Applicants Signature: *Chance Matula*

There will be a \$35.00 License fee to be paid at the time the license is issued

Return completed form to:  
Mills City Hall  
720 4<sup>th</sup> Street  
307-234-6679

OFFICE USE ONLY  
This license was / was not  
Granted at a meeting of the Mills  
City Council on the \_\_\_\_\_  
Attest \_\_\_\_\_



**CITY OF MILLS**  
EST. 1921

RECEIVED

**APPLICATION FOR  
Contractor License**

A Contractor License is required for ANY Contractor doing work within the City of Mills, a Contractor's License Application must be completed. Incomplete applications shall be returned.

License #: 970

Date: 5-12-24

New License     Renewal License     Expired License

**PAID**

MAY 14 2024

GENERAL INFORMATION

Name of Business: American plumbing and Heating

Physical Address: 4830 Oregon trail, Mills WY 82604  
Street City State Zip

Mailing Address: P.O. Box 1911 Mills WY 82644  
Street City State Zip

Business Phone Number: (307) 234-0000 Cell Number: (307) 262-2099

Email Address: Ameriplumb@aol.com Website: Americanplumbingwy.com

License Classifications: Master plumber and plumbing contractor

LICENSE ISSUED BY

City of Mills     City of Casper     Natrona County     State of Wyoming     Other

A copy of all licenses must be attached to this application

APPLICANT INFORMATION

Applicant Name: Joseph A. Dennis Jr Phone Number: (307) 234-0000

Mailing Address: P.O. Box 1911 Mills WY 82644  
Street City State Zip

I certify that the above information is correct and true to the best of my knowledge.

Applicants Signature: Joseph A. Dennis Jr

There will be a \$35.00 License fee to be paid at the time the license is issued

Return completed form to:  
Mills City Hall  
720 4<sup>th</sup> Street  
307-234-6679

**OFFICE USE ONLY**  
This license was / was not  
Granted at a meeting of the Mills  
City Council on the \_\_\_\_\_  
Attest \_\_\_\_\_



CITY OF MILLS  
EST. 1921

RECEIVED

MAY 14 2024

**APPLICATION FOR  
Contractor License**

A Contractor License is required for ANY Contractor doing work within the City of Mills, a Contractor's License Application must be completed. Incomplete applications shall be returned.

License #: 91047

Date: 5-11-24

New License  Renewal License  Expired License

PAID

MAY 14 2024

GENERAL INFORMATION

Name of Business: AC Electric of Casper

Physical Address: 2708 PLAYER DRIVE CASPER WY 82601  
Street City State Zip

Mailing Address: SAME  
Street City State Zip

Business Phone Number: 307 249-2347 Cell Number: SAME

Email Address: BLAKEM@BAESWAN.NET Website:

License Classifications: CONTRACTOR + MASTER

LICENSE ISSUED BY

City of Mills  City of Casper  Natrona County  State of Wyoming  Other

A copy of all licenses must be attached to this application

APPLICANT INFORMATION

Applicant Name: Michelle J Blake Phone Number: 247-2347

Mailing Address: 2708 PLAYER DRIVE CASPER WY 82601  
Street City State Zip

I certify that the above information is correct and true to the best of my knowledge.

Applicants Signature: Michelle J Blake

There will be a \$35.00 License fee to be paid at the time the license is issued

Return completed form to:  
Mills City Hall  
720 4th Street  
307-234-6679

OFFICE USE ONLY  
This license was / was not  
Granted at a meeting of the Mills  
City Council on the \_\_\_\_\_  
Attest \_\_\_\_\_



CITY OF MILLS  
EST. 1921

# APPLICATION FOR Contractor License

A Contractor License is required for ANY Contractor doing work within the City of Mills, a Contractor's License Application must be completed. Incomplete applications shall be returned.

License #: 9878

Date: 5/11/20

New License     Renewal License     Expired License

*Partial Cash  
5/11/20*

### GENERAL INFORMATION

Name of Business: Tactical Xteriors

Physical Address: 4408 Trotter Casper WY 82604  
Street City State Zip

Mailing Address: Same as above  
Street City State Zip

Business Phone Number: 307-333-3772 Cell Number: \_\_\_\_\_

Email Address: TacticalXteriors@gmail.com Website: \_\_\_\_\_

License Classifications: Roofing

### LICENSE ISSUED BY

City of Mills     City of Casper     Natrona County     State of Wyoming     Other

*A copy of all licenses must be attached to this application*

### APPLICANT INFORMATION

Applicant Name: Michael Tack Phone Number: \_\_\_\_\_

Mailing Address: 4408 Trotter Rd Casper WY 82604  
Street City State Zip

I certify that the above information is correct and true to the best of my knowledge.

Applicants Signature: Michael Tack

There will be a \$35.00 License fee to be paid at the time the license is issued

Return completed form to:  
Mills City Hall  
720 4<sup>th</sup> Street  
307-234-6679

OFFICE USE ONLY  
This license was / was not  
Granted at a meeting of the Mills  
City Council on the \_\_\_\_\_  
Attest \_\_\_\_\_



**CITY OF MILLS**  
EST. 1921

# APPLICATION FOR Contractor License

A Contractor License is required for ANY Contractor doing work within the City of Mills, a Contractor's License Application must be completed. Incomplete applications shall be returned.

License #: 9879

Date: May 20 2024

New License     Renewal License     Expired License

### GENERAL INFORMATION

Name of Business: Oil City Concrete

Physical Address: 1950 Kingsboro Rd. Casper WY. 82604  
Street City State Zip

Mailing Address: 1950 Kingsboro Rd. Casper WY. 82604  
Street City State Zip

Business Phone Number: 307 797 6070 Cell Number: 307 797 6070

Email Address: charwell24@yahoo.com Website: \_\_\_\_\_

License Classifications: Concrete Foundations / Flatwork

### LICENSE ISSUED BY

City of Mills     City of Casper     Natrona County     State of Wyoming     Other

*A copy of all licenses must be attached to this application*

### APPLICANT INFORMATION

Applicant Name: Christopher Harwell Phone Number: 307 797 6070

Mailing Address: 1950 Kingsboro Rd. Casper WY. 82604  
Street City State Zip

**I certify that the above information is correct and true to the best of my knowledge.**

Applicants Signature: \_\_\_\_\_

There will be a \$35.00 License fee to be paid at the time the license is issued

Return completed form to:  
Mills City Hall  
720 4<sup>th</sup> Street  
307-234-6679

<b>OFFICE USE ONLY</b> This license was / was not Granted at a meeting of the Mills City Council on the _____ Attest _____
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**CITY OF MILLS**  
EST. 1921

RECEIVED

MAY 21 2024

**APPLICATION FOR  
Contractor License**

A Contractor License is required for ANY Contractor doing work within the City of Mills, a Contractor's License Application must be completed. Incomplete applications shall be returned.

License #: 9880

Date: 5-21-2024

New License     Renewal License     Expired License

GENERAL INFORMATION

Name of Business: 4T Contracting

Physical Address: 8101 E Shady LN Evansville WY 82636  
Street City State Zip

Mailing Address: P.O. Box 45 Evansville WY 82636  
Street City State Zip

Business Phone Number: 307-259-5479 Cell Number: \_\_\_\_\_

Email Address: bo.fowler77@gmail.com Website: \_\_\_\_\_

License Classifications: General Contractor

LICENSE ISSUED BY

LLC 2017-000774529

City of Mills     City of Casper     Natrona County     State of Wyoming     Other

A copy of all licenses must be attached to this application

APPLICANT INFORMATION

Applicant Name: William Fowler Phone Number: 307-259-5479

Mailing Address: P.O. Box 45 Evansville WY 82636  
Street City State Zip

I certify that the above information is correct and true to the best of my knowledge.

Applicants Signature: [Signature]

**PAID**

There will be a \$35.00 License fee to be paid at the time the license is issued

MAY 21 2024

Return completed form to:  
Mills City Hall  
720 4th Street  
307-234-6679

<p align="center"><b>OFFICE USE ONLY</b></p> <p align="center">This license was / was not Granted at a meeting of the Mills City Council on the _____</p> <p align="center">Attest _____</p>
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