





**CITY OF MILLS**  
EST. 1921

**RECEIVED**

NOV 15 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 #: 9910

Date: 11-13-25

New Business     Change of Ownership     Change of Location     Renewal     Expired

GENERAL INFORMATION

Name of Business: DBA AA Casper Public Storage / Triple Net Properties LLC

Physical Address: 131 Casper View Court Mills WY 82644  
Street City State Zip

Mailing Address: PO Box 1561 Mills WY 82644  
Street City State Zip

Business Phone Number: 702-279-6673 WY Tax ID Number: 2022-001108159

Email Address: StorageCasper@gmail.com Website: StorageCasper.com

Description of Business: Self-storage facility with 139 units of a variety of sizes from 5x8 to 10x20

APPLICANT INFORMATION

Applicant Name: Angela Herolt / Registered Agent Phone Number: 702-279-6673

Mailing Address: PO Box 1561 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: [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

**PAID**  
NOV 18 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 \_\_\_\_\_



**CITY OF MILLS**  
EST. 1921

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JUN 21 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 #: 9904

Date: 6/21/2024

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

GENERAL INFORMATION

Name of Business: EnerMech Mechanical Services, Inc

Physical Address: 738 N Robertson Rd Casper WY 82604  
Street City State Zip

Mailing Address: 738 N Robertson Rd Casper WY 82604  
Street City State Zip

Business Phone Number: 281-477-7828 WY Tax ID Number: 1011388

Email Address: us.sales@enermech.com Website: www.enermech.com

Description of Business: EnerMech performs process pipeline, mechanical work also commissioning, decommissioning, pipeline installation and repairs among other services.

More information about our services can be found at [www.enermech.com](http://www.enermech.com)

APPLICANT INFORMATION

Applicant Name: EnerMech Mechanical Services Phone Number: 281-477-7828

Mailing Address: 12101 Cutten Rd Houston TX 77066  
Street City State Zip

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

Applicants Signature: Alberto Villegas

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	\$250.00
Businesses with Fire Alarm, Sprinkler System or Hood Suppression	+ \$50.00

PAID  
JUN 21 2024

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

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 City Council on the \_\_\_\_\_  
 Attest \_\_\_\_\_

RECEIVED

JUL 08 2024

APPLICATION FOR Business License



CITY OF MILLS EST. 1921

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 #: 9908

Date: 07-05-2024

- Checked: New Business; Unchecked: Change of Ownership, Change of Location, Renewal, Expired

GENERAL INFORMATION

Name of Business: FDS Enterprises, Inc.

Physical Address: 3556 Burd Rd Mills WY 82644

Mailing Address: 2342 Hanway Ave Casper WY 82604

Business Phone Number: 307-267-4437 WY Tax ID Number:

Email Address: fdsent.t.bowen@gmail.com Website: none

Description of Business: Shop for repair and maintenance of vehicles owned by our business, FDS Enterprises, Inc. No customers, no revenue earned at this shop.

APPLICANT INFORMATION

Applicant Name: Jeffrey A. or Theresa A. Bowen Phone Number: 307-267-4437

Mailing Address: 2342 Hanway Ave Casper WY 82604

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

Applicants Signature: Theresa A Bowen for FDS Enterprises, Inc.

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. Includes categories like Self-Assessment Fire Inspection, 1-5,000 Sq. Feet, etc.

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

PAID JUL 08 2024

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**CITY OF MILLS**  
EST. 1921

**PAID**  
NOV 07 2004

**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 #: 1101

Date: 11.7.24

New Business     Change of Ownership     Change of Location     Renewal     Expired

GENERAL INFORMATION

Name of Business: All Out Fire Extinguisher S & S

Physical Address: 710 Johnson Ave Mills WY 82644  
Street City State Zip

Mailing Address: P.O. Box 790 Mills WY 82644  
Street City State Zip

Business Phone Number: 307-234-2313 WY Tax ID Number: 84-1428661

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

Description of Business: Fire Extinguisher Sales and Services.

APPLICANT INFORMATION

Applicant Name: Jordan Honea Phone Number: 307-315-4406

Mailing Address: P.O. Box 790 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: Jordan Honea

**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	\$250.00
Businesses with Fire Alarm, Sprinkler System or Hood Suppression	+ \$50.00

Return completed form to:  
Mills City Hall  
704 4<sup>th</sup> Street  
Po Box 789  
Mills, WY 82644  
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>
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**CITY OF MILLS**  
EST. 1921

# 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 #: 1028

Date: 7/15/2024

New Business     Change of Ownership     Change of Location     Renewal     Expired

### GENERAL INFORMATION

Name of Business: Nix Signs Company, LLC

Physical Address: 5025 W Yellowstone Highway Casper WY 82604  
Street City State Zip

Mailing Address: 5025 W Yellowstone Highway Casper WY 82604  
Street City State Zip

Business Phone Number: 307-235-1997 WY Tax ID Number: 830321450

Email Address: Sales@nixsigns.com Website: Nixsigns.com

Description of Business: Repair, Maintenance and install signage

### APPLICANT INFORMATION

Applicant Name: Amanda Teske Phone Number: 307-235-1997

Mailing Address: 5025 W Yellowstone Highway 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: Amanda Teske

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	\$250.00
Businesses with Fire Alarm, Sprinkler System or Hood Suppression	+ \$50.00

Return completed form to:  
Mills City Hall  
704 4<sup>th</sup> Street  
Po Box 789  
Mills, WY 82644  
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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**CITY OF MILLS**  
EST. 1921

**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 #: 9558

Date: 11-6-24

New Business     Change of Ownership     Change of Location     Renewal     Expired

GENERAL INFORMATION

Name of Business: Western Creations Taxidermy, LLC

Physical Address: 700 Johnson Ave Mills WY 82644  
Street City State Zip

Mailing Address: P.O. Box 382 Mills WY 82644  
Street City State Zip

Business Phone Number: 307-258-7226 WY Tax ID Number: 01011592

Email Address: wyotaxidermy@gmail.com Website: www.westerncreations.net

Description of Business: Taxidermy

APPLICANT INFORMATION

Applicant Name: Cherie & Andrew Butcher Phone Number: 307-258-7226

Mailing Address: P.O. Box 382 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: Andrew Butcher

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	\$250.00
Businesses with Fire Alarm, Sprinkler System or Hood Suppression	+ \$50.00

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NOV 19 2024

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Po Box 789  
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307-234-6679

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**CITY OF MILLS**  
EST. 1921

**PAID**  
NOV 15 2006

**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 #: 874

Date: 11-15-24

New Business     Change of Ownership     Change of Location     Renewal     Expired

GENERAL INFORMATION

Name of Business: WESTERN RADIATOR  
Physical Address: 4935 W. YELLOWSTONE Mills NY 82604  
Street City State Zip

Mailing Address: P.O. Box 1553 CASPER WY 82602  
Street City State Zip

Business Phone Number: 307-315-4607 WY Tax ID Number: 83-0197152

Email Address: MATTBROWN68@AOL.COM Website: \_\_\_\_\_

Description of Business: RADIATOR SALES & SERVICE

APPLICANT INFORMATION

Applicant Name: MATT BROWN Phone Number: 315-4607

Mailing Address: P.O. Box 1553 CASPER ~~WY~~ WY 82602  
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 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	\$250.00
Businesses with Fire Alarm, Sprinkler System or Hood Suppression	+ \$50.00

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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 #: 9945

Date: 11/20/24

New License     Renewal License     Expired License

### GENERAL INFORMATION

**PAID**  
NOV 20 2024

Name of Business: DDD Extentors Inc

Physical Address: 7673 w Chalk Creek Rd Casper WY 82604  
Street City State Zip

Mailing Address: Same  
Street City State Zip

Business Phone Number: 307-267-8372 Cell Number: Same

Email Address: dddextentors@yahoo.com Website: dddextentors.com

License Classifications: class # general contractor Thru casper

### 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: Travis Downs Phone Number: 267-8372

Mailing Address: 7673 w Chalk Creek 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: [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  
704 4<sup>th</sup> Street  
Po Box 789  
Mills, WY 82644  
307-234-6679

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City Council on the \_\_\_\_\_  
Attest \_\_\_\_\_

**City of Casper**

200 N David  
Casper, WY 82601  
(307) 235-8254

**PROFESSIONAL LICENSE CERTIFICATE**

<b>Issued To:</b>	<b>FRANK DOWNS</b>	<b>Certification(s):</b>	WCA00000114 - General Liability Insurance
<b>Mailing Address:</b>	7673 W CHALK CREEK ROAD CASPER, WY 82604		
<b>License Number:</b>	CONT-000514-2022	<b>License Type:</b>	Contractor License
<b>Issued Date:</b>	2/27/2024	<b>Classification:</b>	Class IIA
<b>Expiration Date:</b>	12/31/2024	<b>Fees Paid:</b>	\$75.00

This license certifies that you have met the requirements set forth by the City of Casper, and you are authorized to perform work within your license type and classification.

**TO BE POSTED IN A CONSPICUOUS PLACE**



CITY OF MILLS  
EST. 1921

**PAID**  
NOV 19 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 #: 9722

Date: 11/19/24

New License     Renewal License     Expired License

#### GENERAL INFORMATION

Name of Business: High Desert Trucking & Construction, Inc

Physical Address: 1639 Palominos Ave Bar Noon WY 82601  
Street City State Zip

Mailing Address: Po Box 50912 Casper WY 82605  
Street City State Zip

Business Phone Number: 307-259-8506 Cell Number: 307-259-8506

Email Address: clansabrosky@gmail.com Website: n/d

License Classifications: Class I, Utility Installer, Utility Contractor  
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: Dan Sabrosky Phone Number: 307-259-8506

Mailing Address: Po Box 50912 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: [Signature]

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

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Attest \_\_\_\_\_



**City of Casper, Wyoming**

**HIGH DESERT TRUCKING & CONSTRUCTION**

has met the requirements set forth by the City of Casper  
and is competent to perform work as a

**Class I**

**CONT-001491-2022**

This License Expires: 12/31/2024



**City of Casper, Wyoming**

**DAN SABROSKY**

has met the requirements set forth by the City of Casper  
and is competent to perform work as a

**Utility Installer**

**INST-001004-2022**

This License Expires: 12/31/2024



**City of Casper, Wyoming**

**HIGH DESERT TRUCKING & CONSTRUCTION**

has met the requirements set forth by the City of Casper  
and is competent to perform work as a

**Utility Contractor**

**CONT-000950-2022**

This License Expires: 12/31/2024



**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 #: \_\_\_\_\_

Date: 11-18-24

New License     Renewal License     Expired License

**PAID**  
NOV 22 2024

GENERAL INFORMATION

Name of Business: Jeremy Hubbard

Physical Address: 237 N Elk Casper WY 82601  
Street City State Zip

Mailing Address: \_\_\_\_\_  
Street City State Zip

Business Phone Number: 970-652-1964 Cell Number: \_\_\_\_\_

Email Address: Aboughy@atlook.com Website: \_\_\_\_\_

License Classifications: Journeyman Plumber PJ-61

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: Jeremy Hubbard Phone Number: 970-652-1964

Mailing Address: 237 N Elk 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

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