

# Council Meeting August 13, 2024

## NEW CONTRACTOR LICENSES

	<b>BUSINESS NAME</b>	<b>CONTRACTOR ID</b>	<b>INSURANCE</b>	<b>FIRE</b>
1	Air Innovations	Yes	NA	NA
2	Kaspar Air Solutions, LLC	Yes	NA	NA
3	Morton Buildings, Inc.	Yes	NA	NA

## RENEWAL CONTRACTOR LICENSES

	<b>BUSINESS NAME</b>	<b>CONTRACTOR ID</b>	<b>INSURANCE</b>	<b>FIRE</b>
1	Absolute Power & Light	Yes	NA	NA
2	AC Electrical Service, LLC.	Yes	NA	NA
3	Alltera Construction	Yes	NA	NA
4	Brutill Construction, Inc.	Yes	NA	NA
5	Kenny's Mobil Home movers	Yes	NA	NA
6	Miracle Plumbing, Inc.	Yes	NA	NA
7	Modern Electric Co	Yes	NA	NA
8	Pater Enterprises	Yes	NA	NA
9	S2M Construction Co, Inc.	Yes	NA	NA
10	Sprecher Electric	Yes	NA	NA

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JUL 31 2024



CITY OF MILLS  
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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 #: 9920

Date: 7/31/2024

New License     Renewal License     Expired License

GENERAL INFORMATION

Name of Business: Air Innovations

Physical Address: 5000 CY Ave    Casper    WY    82604  
Street    City    State    Zip

Mailing Address: PO BOX 1055    Casper    WY    82602  
Street    City    State    Zip

Business Phone Number: 307-333-1042    Cell Number: \_\_\_\_\_

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

License Classifications: Heating, Ventilation and Air Conditioning (HVAC)

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: Brianna Fitzgerald    Phone Number: 307-333-1042

Mailing Address: PO BOX 1055    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: Brianna Fitzgerald

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

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Mills City Hall  
720 4th Street  
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APPLICATION FOR Contractor License



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License #: 9922

Date: 8/5/2024

[X] New License [ ] Renewal License [ ] Expired License

GENERAL INFORMATION

Name of Business: KASPAR AIR SOLUTIONS LLC

Physical Address: 1028 JEFFERSON ST DOUGLAS WY 82633

Mailing Address: P.O. Box 1504 DOUGLAS WY 82633

Business Phone Number: (307) 358-1970 Cell Number: (307) 277-1948

Email Address: KASPARAIRSOLUTIONS@gmail.com Website: www.KASPARAIRSOLUTIONS.COM

License Classifications: HVAC

LICENSE ISSUED BY

[ ] City of Mills [X] City of Casper [X] Natrona County [ ] State of Wyoming [ ] Other

A copy of all licenses must be attached to this application

APPLICANT INFORMATION

Applicant Name: KASPARS KARTUPELLS Phone Number: (307) 277-1948

Mailing Address: P.O. Box 1504 DOUGLAS WY 82633

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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**APPLICATION FOR  
Contractor License**

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License #: 9918

Date: \_\_\_\_\_

New License     Renewal License     Expired License

GENERAL INFORMATION

Name of Business: MORTON BUILDINGS, INC.

Physical Address: 252 W. ADAMS STREET, MORTON, IL 61550  
Street City State Zip

Mailing Address: PO BOX 399, MORTON, IL 61550  
Street City State Zip

Business Phone Number: 309-263-7474

Cell Number: \_\_\_\_\_

Email Address: MBICONTRACTORLICENSE@MORTONBUILDINGS.COM

Website: WWW.MORTONBUILDINGS.COM

License Classifications: GENERAL CONTRACTOR - CLASS I

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: SEAN CAIN, PRESIDENT AND CEO

Phone Number: 309-263-7474

Mailing Address: PO BOX 399, MORTON, IL 61550  
Street City State Zip

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

Applicants Signature: *Sean Cain*

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

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**APPLICATION FOR  
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License #: 9609

Date: 07/29/24

New License     Renewal License     Expired License

GENERAL INFORMATION

Name of Business: AC Electrical Service, LLC

Physical Address: 22337 Lake Ridge Road Alcova, WY 82620  
Street City State Zip

Mailing Address: P.O. Box 77 Alcova, WY 82620  
Street City State Zip

Business Phone Number: 307.277.2352 Cell Number: 307.277.2352

Email Address: acelectrical17@yahoo.com Website: \_\_\_\_\_

License Classifications: Electrical

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: Vance Mockensturm Phone Number: 307.277.2352

Mailing Address: P.O. Box 77 Alcova, WY 82620  
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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JUL 26 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 #: 91038

Date: July 26

New License     Renewal License     Expired License

#### GENERAL INFORMATION

Name of Business: ALTERA Construction

Physical Address: 5650 Poison Spine Mills WY 82604  
Street City State Zip

Mailing Address: SARAS  
Street City State Zip

Business Phone Number: 307 664 6744 Cell Number: 247 0647

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

License Classifications: Utility Contractor, Demos Contractor  
General class 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: STEVE KENNEDY Phone Number: 247 0647

Mailing Address: 5650 Poison Spine Mills 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]

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

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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 #: 986

Date: 7-30-2024

New License  Renewal License  Expired License

GENERAL INFORMATION

Name of Business: Bratill Construction, Inc.

Physical Address: 6375 E. Yellowstone Hwy Evansville WY 82603  
Street City State Zip

Mailing Address: SAME  
Street City State Zip

Business Phone Number: 307-237-6601 Cell Number:                     

Email Address: ap@bratillconstruction.com Website: www.bratillconstruction.com

License Classifications: Excavation 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: Katherine Till - President Phone Number: 307-237-6601

Mailing Address: 6375 E. Yellowstone Hwy Evansville WY 82603  
Street City State Zip

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

Applicants Signature: Katherine Till

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

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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 #: 910108

Date: 7-18-24

New License     Renewal License     Expired License

GENERAL INFORMATION

Name of Business: Kennys Mobile Home Movers

Physical Address: 110 W. G street Casper WY 82601  
Street City State Zip

Mailing Address: SAME  
Street City State Zip

Business Phone Number: 307-3376748 Cell Number: office 307-337-6208

Email Address: Kennysouza@hotmail.com Website: \_\_\_\_\_

License Classifications: Mobile Home set & utility

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: Kenneth D Souza Phone Number: 307.337.6748

Mailing Address: 110 W. G 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: Kenneth D Souza

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

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JUL 23 2024

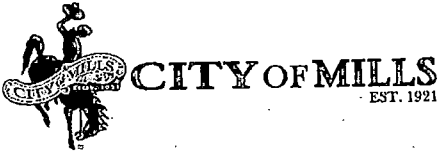
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APPLICATION FOR Contractor License



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 #: 10210

Date: \_\_\_\_\_

New License  Renewal License  Expired License

GENERAL INFORMATION

Name of Business: Miracle Plumbing, Inc.

Physical Address: 826 West Midwest Ave #4 Casper WY 82601

Mailing Address: 826 West Midwest Ave. #4 Casper WY 82601

Business Phone Number: (307) 234-6263 Cell Number: (307) 247-2451

Email Address: Miracleplumbing2@gmail.com Website: \_\_\_\_\_

License Classifications: Plumbing

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 L. Elston Phone Number: (307) 247-245

Mailing Address: 2090 Prairie Lane Bar Nunn WY 82601

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

Applicants Signature: Michael Elston

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

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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 #: 1027

Date: 7-16-24

New License  Renewal License  Expired License

GENERAL INFORMATION

Name of Business: Modern Electric Co

Physical Address: 246 W First St Casper WY 82602  
Street City State Zip

Mailing Address: PO Box 2107 Casper WY 82602  
Street City State Zip

Business Phone Number: 307-266-1711 Cell Number: \_\_\_\_\_

Email Address: wilsonk@modern-electric.com Website: \_\_\_\_\_

License Classifications: Electrical 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: Kristin Wilson Phone Number: 307-266-1711

Mailing Address: PO Box 2107 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: Kristin Wilson

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

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**APPLICATION FOR  
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*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 #: 9059

Date: July 25/24

New License     Renewal License     Expired License

GENERAL INFORMATION

Name of Business: Pater Enterprises

Physical Address: 3997 Whispering Springs Rd Casper WY 82604  
Street City State Zip

Mailing Address: same  
Street City State Zip

Business Phone Number: (307) 262-7009 Cell Number: (307) 262-7009

Email Address: cvpater@gmail.com Website: N/A

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: Charles Pater Phone Number: (307) 262-7009

Mailing Address: 3997 Whispering Springs 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

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JUL 17 2024

APPLICATION FOR Contractor License



CITY OF MILLS EST. 1921

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 #: 9756

Date: 7/15/24

License type options: New License, Renewal License, Expired License

GENERAL INFORMATION

Name of Business: S2M Construction Co. Inc

Physical Address: 282 Center Dr, Glenwood Springs Co, 81601

Mailing Address: PO Box 1578, Glenwood Springs Co, 81602

Business Phone Number: 970.945.1174 Cell Number:

Email Address: acctg@s2mconstruction.com Website: www.s2mconstruction.com

License Classifications: Construction

LICENSE ISSUED BY

Issued by options: City of Mills, City of Casper, Natrona County, State of Wyoming, Other

APPLICANT INFORMATION

Applicant Name: Scott Miller Phone Number: 970.945.1174

Mailing Address: PO Box 1578, Glenwood Springs Co, 81602

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

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JUL 25 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 #: 9705

Date: 7-15-2024

License type options: New License, Renewal License (checked), Expired License

GENERAL INFORMATION

Name of Business: Sprecher Electric Inc.

Physical Address: 128 N. Center St, Casper, Wyo 82601

Mailing Address: P.O. Box 278, Casper, Wyo 82601

Business Phone Number: 307-265-8135 Cell Number: 307-277-7014

Email Address: spreche@tribcsp.com Website:

License Classifications: Electrical Contractor

LICENSE ISSUED BY

Issuance location options: 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: Phone Number:

Mailing Address: Street, City, State, Zip

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

Applicants Signature: Vicki Spruch

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

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