



RECEIVED

JUN 11 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 #: 9898

Date: 5/29/2024

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

GENERAL INFORMATION

Name of Business: Holloman Corporation

Physical Address: 333 N. Sam Houston Pkwy E. Suite 600 Houston, TX 77060 884 JC Rd
Casper Wy

Street City State Zip

Mailing Address: 333 N. Sam Houston Pkwy E. Suite 600 Houston, TX 77060

Street City State Zip

Business Phone Number: 281-260-1011 WY Tax ID Number: _____

Email Address: trinitytate@hollomancorp.com Website: www.hollomancorp.com

Description of Business: Pipeline Construction

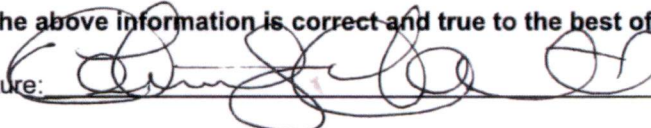
APPLICANT INFORMATION

Applicant Name: Trinity Tate Phone Number: 2816205943

Mailing Address: 333 N. Sam Houston Pkwy E. Suite 600 Houston, TX 77060

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 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 11 2024

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

JUN 24 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 #: 9905

Date: 6/17/24

New Business Change of Ownership Change of Location Renewal Expired

GENERAL INFORMATION

Name of Business: Storage Unlimited K & L Storage

Physical Address: 3347 MJB Road Casper WY 82601
Street City State Zip

Mailing Address: 5005 CY Ave Casper WY 82604
Street City State Zip

Business Phone Number: 307-265-1291 WY Tax ID Number: _____

Email Address: billing@kandlstorage.com Website: kandlstorage.com

Description of Business: Storage Facility

APPLICANT INFORMATION

Applicant Name: Mapilabloche Ray Phone Number: 307-265-1291

Mailing Address: 5005 CY Ave 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 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 24 2024

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City Council on the _____
Attest _____



CITY OF MILLS
EST. 1921

RECEIVED

MAY 20 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 #: 9888

Date: 5-10-24

New Business Change of Ownership Change of Location Renewal Expired

GENERAL INFORMATION

Name of Business: Highlands Auto Sales LLC

Physical Address: 302 Van Horn street mills wyo 82644
Street City State Zip

Mailing Address: _____
Street City State Zip

Business Phone Number: 307-213-0184 WY Tax ID Number: _____

Email Address: highlandsauto@phm.com Website: _____

Description of Business: used car dealership

APPLICANT INFORMATION

Applicant Name: Juan Picazo Phone Number: 307-213-0184

Mailing Address: Box 2545 mills wyo 82644
Street City State Zip

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

Applicants Signature: Juan Picazo

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

MAY 20 2024

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

OFFICE USE ONLY
<i>This license was / was not</i>
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<i>City Council on the _____</i>
Attest _____

RECEIVED

JUN 12 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 #: 9838

Date: 6-12-24

- License type options: New Business, Change of Ownership, Change of Location, Renewal (checked), Expired

GENERAL INFORMATION

Name of Business: Brigade Energy Services

Physical Address: 1028 N Robertson Rd Casper WY 82604

Mailing Address: 1028 N. Robertson Rd Casper WY 82604

Business Phone Number: 307-215-3859 WY Tax ID Number: 814763034

Email Address: kvannorman@brigade.energy Website: www.brigadeenergyservices.com

Description of Business: Workover rigs, oil & gas well services

APPLICANT INFORMATION

Applicant Name: Kamden Vannorman Phone Number: 307-215-385

Mailing Address: 1028 N Robertson Rd Casper WY 82604

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.

Table with 2 columns: Business description and Fee amount. Includes categories like 'Businesses that qualify for a Self-Assessment Fire Inspection' and 'Businesses between 1-5,000 Sq. Feet'.

PAID

JUN 12 2024

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

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Granted at a meeting of the Mills
City Council on the
Attest



CITY OF MILLS
EST. 1921

RECEIVED

JUN 25 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 #: 9649

Date: 6/27/24

New Business Change of Ownership Change of Location Renewal Expired

GENERAL INFORMATION

Name of Business: Casper Gymnastics Center LLC

Physical Address: 3524 Burd Rd. Mills WY. 82604
Street City State Zip

Mailing Address: 2130 Lakota Trl. Barnum WY. 82601
Street City State Zip

Business Phone Number: 307-267-5771 WY Tax ID Number: 46-3606738

Email Address: ashlee@caspergymnastics.com Website: www.caspergymnastics.com

Description of Business: Gymnastics For Youth

APPLICANT INFORMATION

Applicant Name: Ashlee Lowndes Phone Number: 307-267-3020

Mailing Address: 2130 Lakota Trl. Barnum WY. 82601
Street City State Zip

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

Applicants Signature: Ashlee Lowndes

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
720 4th Street
307-234-6679

PAID
JUN 27 2024

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

CEIVED

MAY 28 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 #: 9442

Date: 5/20/24

New Business Change of Ownership Change of Location Renewal Expired

GENERAL INFORMATION

Name of Business: Cleary Building Corp.

Physical Address: 190 Padli Street Verona WI 53593
Street City State Zip

Mailing Address: P.O. Box 930220 Verona WI 53593-0220
Street City State Zip

Business Phone Number: 608845-9700 WY Tax ID Number: 24-0-06222

Email Address: license@clearybuilding.com Website: clearybuilding.com

Description of Business: Post Frame Construction

APPLICANT INFORMATION

Applicant Name: Karl H. Lemmenes Phone Number: 608845-9700

Mailing Address: Same as above
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
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Businesses with Fire Alarm, Sprinkler System or Hood Suppression	+ \$50.00

PAID
MAY 28 2024

Return completed form to:
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307-234-6679

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

RECEIVED

JUN 25 2024



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 #: 988

Date: June 13 2024

New License Renewal License Expired License

GENERAL INFORMATION

Name of Business: Coleman Repair

Physical Address: 4980 Oregon Trail Mills WY 82644
Street City State Zip

Mailing Address: 73 N. 3rd Ave. Mills WY 82644
Street City State Zip

Business Phone Number: 307-262-1280 Cell Number: _____

Email Address: rosie.coleman@2006@hotmail.com Website: _____

License Classifications: snow removal, truck + auto repairs on family + self vehicles

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: Rosie Coleman Phone Number: 262-1280

Mailing Address: 73 N. 3rd Ave. 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: Rosie Coleman

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

PAID

JUN 25 2024

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 _____



RECEIVED

JUN 25 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 #: 995

Date: _____

New Business Change of Ownership Change of Location Renewal Expired

GENERAL INFORMATION

Name of Business: Geotec Industrial Supply

Physical Address: 600 Bear Pen Rd. Mills WY 82644
Street City State Zip

Mailing Address: P.O. Box 130 Mills WY 82644
Street City State Zip

Business Phone Number: 307-472-0084 WY Tax ID Number: 01-0-06576

Email Address: Sales@geotecsupply.com Website: www.geotecsupply.com


Description of Business: Construction Supply warehouse

APPLICANT INFORMATION

Applicant Name: Kody Pivik Phone Number: 307-472-0084

Mailing Address: P.O. Box 130 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: 

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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JUN 25 2024

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 _____

License # 9823

Application for Business License - City of Mills

DATE 05/04/2024

Incomplete Applications will be returned. Complete all fields in RED



I, Shayna Kaul, the Auhorized Agent of United Rentals (North America), Inc.
NAME TITLE (i.e. owner, manager, etc.) BUSINESS NAME (as it will appear on the license)

located at 5103 W YELLOWSTONE HWY CASPER, WY 82604-2201
BUSINESS PHYSICAL STREET ADDRESS CITY, STATE, ZIP

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

RECEIVED
MAY 15 2024

PAID
MAY 10 2024

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

DESCRIBE THE TYPE OF BUSINESS

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

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

Business mailing address: 140 Grand Street, Suite 300

City White Plains State NY Zip 10601

Business phone number: 307-237-3771 WY Tax ID Number: 25002679

- 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 commerical 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 JA. Print Name Julie Ann Cabucos

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: 7/5/24

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