

## **Council Meeting: November 12, 2024**

	New Busine	ess Licenses	
	Business Name	Fire Inspection	Insurance
9942	New Vision Thrift Store	10/11/2024	N/A
9941	Tewes Design Studio	11/5/2024	N/A
	Renewal Busi	iness Licenses	
	Business Name	Fire Inspection	Insurance
9680	307 Cowboy Country LLC	10/28/2024	N/A
1148	Care Mobile Home Service LLC	10/23/2024	11/12/2025
788	Dan's Auto Electric	10/28/2024	N/A
9808	Exero Well Integrity	10/29/2024	N/A
9732	Kenny Electric	11/5/2024	N/A
1114	Key Energy Services	10/31/2024	N/A
1117	Pope Construction Inc	10/23/2024	4/22/2025
9801	Soda Springs Drinks, LLC	10/23/2024	N/A
9843	Swaggers Sneakers & Styles	11/8/2024	N/A
	7		





Attest \_\_\_

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 #: 976 997	12			Dat	e: 10/24/24
☐ New Business ☐	Change of Ownership	☑ Change of Location	☐ Renewa	I 🗆 Ex	rpired
GENERAL INFORMATION					
Name of Business: New Visio	on Thrift Store				
Physical Address: 4505 W Y	ellowstone HWY				
St	treet	City	1	State	Zip
Mailing Address: PO Box 26	35 Casper, WY 82	602			
	treet	City	!	State	Zip
Business Phone Number: 307-	333-6545	WY Tax ID Number: 83-	0313191		10
Email Address: info@visionbe	eyondborders.org	Website: Visionbeyor		.org	
Description of Business: Thrift	Store				
APPLICANT INFORMATION  Applicant Name: Patrick Klei	n		Phone i	Number: 3	3073336545
Mailing Address: PO Box 263		602		, , , , , , , , , , , , , , , , , , ,	
	reet	City		State	Zip
I certify that the above in Applicants Signature:	on fee to be paid at the	time the License is issu			-
Businesses that qualify for a Se	•				
Businesses between 1-5,000 Sq Businesses between 5,001-10,0	•	\$75.00 \$125.0			
Businesses greater than 10,000	Control of the Contro	\$125.0 \$250.0			
Businesses with Fire Alarm, Sp					
Return completed form to: Mills City Hall 720 4 <sup>th</sup> Street 307-234-6679			G	his license v	USE ONLY vas / was not neeting of the Mills n the



307-234-6679

# OCT 3 0 2024

# **APPLICATION FOR Business License**

Attest \_\_\_

OCT 3 0 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.

	completed. Incomplete applications shall be returned.	
License #: 994		Date: (0-30

	Change of Ownership	☐ Change of Location ☐ Re	newal Exp	ired
GENERAL INFORMATION				
Name of Business: <u>Tewes</u> De	sign Studio			
Physical Address: 4656 W	Yellow Stone treet	<u>Caspes</u> City	<i>Wy</i> State	<i>8260 4</i> Zip
Mailing Address: <u>1 วงร์ 50</u> โ	ligilante Court	<u>C &amp;s per</u> City	<i>luy</i> State	<i>82604</i> Zip
Business Phone Number: <u>307</u> -		WY Tax ID Number: 33-1579		
Email Address: <u>Tewes designs+ud</u>	o Q. gmail. com	Website:		
Selling Description of Business: Wood Crafts, and some metaphys		raving products selling	Rocks, jewelry,	randmade
APPLICANT INFORMATION  Applicant Name: James Tew			none Number: 3	
Mailing Address: <u>1<i>2850 Vigila</i></u> S	treet	Casper City	State	<i>82</i> 604 Zip
I certify that the above in Applicants Signature:	i mesterel	d true to the best of my knowle	edge.	
Businesses that qualify for a S Businesses between 1-5,000 S Businesses between 5,001-10,000 Businesses greater than 10,000 Businesses with Fire Alarm, Sp	q. Feet (00059, 1) 000 Sq. Feet 0 Sq. Feet	\$75.00 \$125.00 \$250.00		
Return completed form to: Mills City Hall 704 4 <sup>th</sup> Street Po Box 789 Mills, WY 82644			This license wa	eeting of the Mills





# **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 #: UPO V	Date: Co Zo Zo
☐ New Business ☐ Change of Ownership ☐ Change of	Location Renewal Expired
GENERAL INFORMATION	
Name of Business: 307 Caubay Country	LIC
Physical Address: 5351 W ellows	stone Hux (Japer 8260)
Mailing Address: 1(25 S EIm St (	State Zip
Business Phone Number 307 441 1815 WY Tax ID N	umber: 834604319
Email Address: 307 Caubuy @ Montana Shed cen	der. com
Description of Business: Sped 30/65	
APPLICANT INFORMATION	
Applicant Name: Bruce Rece	Phone Number 307 441 41 4
Mailing Address: 125 5 Elm 4 (3	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 Lice	nse is issued.
Businesses that qualify for a Self-Assessment Fire Inspection Businesses between 1-5,000 Sq. Feet	\$45.00 \$75.00
Businesses between 5,001-10,000 Sq. Feet	\$125.00
Businesses greater than 10,000 Sq. Feet Businesses with Fire Alarm, Sprinkler System or Hood Suppression	\$250.00 + \$50.00

Return completed form to: Mills City Hall 704 4<sup>th</sup> Street Po Box 789 Mills, WY 82644 307-234-6679

OFFICE USE ONLY

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

Attest \_\_\_\_



Po Box 789

Mills, WY 82644

307-234-6679

# APPLICATION FOR Business License

This license was / was not

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

Attest \_\_

Granted at a meeting of the Mills

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 #: 148		Date	10-18-24
☐ New Business ☐ Change of Ownership ☐ Change of	Location 🕏 Rene	ewal	pired
GENERAL INFORMATION			
Name of Business: (ARE Mobile Home 5.	ervice	LLC	
Physical Address: 214 Tohnson Aug Street	Mells	WYO	826 14 Zin
Mailing Address: Pop 1871 Street	mills	Wyo	82644
Business Phone Number 300-260-2273 WY Tax ID Nu			
Email Address: REMY Dharron @ 6-Mail otom Website:			
Description of Business: Mobile Home repair			
APPLICANT INFORMATION  Applicant Name: REMT Larson	Dho	no Number 27	7-2/2-22/2
Applicant Name. N Long 2013 - 1004	Pno	ne Number 2	7 26/200
Mailing Address: 702 midwest Aue PO Por 1071 Street	City	State	82644 Zip
I certify that the above information is correct and true to the b	pest of my knowled	lge.	
Applicants Signature: Lenny Land			
There will be a fire inspection fee to be paid at the time the Licer	nse 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 Businesses with Fire Alarm, Sprinkler System or Hood Suppression	\$250.00 + \$50.00		
	. 400.00		
Return completed form to:			
Mills City Hall 704 4 <sup>th</sup> Street		OFFICE U	JSE ONLY



Po Box 789

Mills, WY 82644

307-234-6679

# **APPLICATION FOR Business License**

Granted at a meeting of the Mills

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

Attest

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 #: 788	4	medicine situation	Da <sup>-</sup>	te: (0/28/24
☐ New Business	Change of Ownership	Change of Location	Renewal F Ex	kpired
GENERAL INFORMATION				
Name of Business:	in's Anto Electric			
Physical Address: 210	Pendell Blvd. Street	Mill City	S, WY	82644 Zip
Mailing Address: P. D	Box 2422 Street	Mills	) U 4 State	82644 Zip
Business Phone Number:	307)234-0022 WY	Tax ID Number:	01002651	3
Email Address: dansaut	<u>selectric Egmail comme</u>	bsite:		
Description of Business:  Repair Shop	Automotive / Indi	istrial Elec	frical	
APPLICANT INFORMATION				
Applicant Name: Dan	Maxwell			307) 220-2592
Mailing Address: <u>6725</u>	5 Johnson Lateral Street	Casper	wy	82604
Loartify that the abo	-	City	State	Ζip
	ve information is correct and tr		owieage.	
Applicants Signature:	Nan mopent			_
There will be a fire insp	ection fee to be paid at the time	the License is issued		
	r a Self-Assessment Fire Inspection	•		
Businesses between 1-5,00 Businesses between 5,001		\$75.00		
Businesses greater than 10		\$125.00 \$250.00		
_	n, Sprinkler System or Hood Suppr			
Return completed form to	Σ.			
Mills City Hall			OFFICE	USE ONLY
704 4th Street				was / was not



# 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 #: 1808	shan be returned.		e: 10/1/24
☐ New Business ☐ Change of Ownership ☐ Change	of Location	Renewal $\Gamma$ Ex	pired
GENERAL INFORMATION			
Name of Business: Exerp Well Integrity			
Physical Address: 350 Duyer Drive Street	Mills	WY State	82604 Zip
Mailing Address: P.O. Box 1449 Street	Mills	State	82644 Zip
Business Phone Number: (301)333 0003 WY Tax ID	Number: 80	1-247058	Ō
Email Address: Ofauber @ exerousa.comwebsite:			
Description of Business: Oil + gas Cementing			
APPLICANT INFORMATION Applicant Name: Ashley Fowber (Controller)	agent)	Phone Number	307)782-195
Mailing Address: PD Box 1449	Mills	WY	82644
Street	City	State	Zip
I certify that the above information is correct and true to th	e best of my kno	owledge.	
Applicants Signature:			_
There will be a fire inspection fee to be paid at the time the Lice	ense is issued.		
Businesses that qualify for a Self-Assessment Fire Inspection Businesses between 1-5,000 Sq. Feet Businesses between 5,001-10,000 Sq. Feet Businesses greater than 10,000 Sq. Feet Businesses with Fire Alarm, Sprinkler System or Hood Suppression	\$45.00 \$75.00 \$125.00 \$250.00 + \$50.00	NO	0 4 2024
Return completed form to:			

Return completed form to: Mills City Hall 704 4<sup>th</sup> Street Po Box 789 Mills, WY 82644 307-234-6679

OFFICE USE ONLY
This license was / was not
Granted at a meeting of the Mills
City Council on the
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# **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  $10/22\sqrt{20}$  Appleted. Incomplete applications shall be returned.

License #: 9732	se returned.	Dat	e:10/22/24
New Business Change of Ownership Change of Loc	cation 🔯 i	Renewal F Ex	pired
GENERAL INFORMATION			
Name of Business: Kenny Electric			
Physical Address: 3667 Burd Rd Mills, WY			
Street	City	State	Zip
Mailing Address: 595 Quivas St Denver CO 80204			
Street	City	State	Zip
Business Phone Number: 307-224-6044 WY Tax ID Numb	oer:		
Email Address: accoutspayable@kenny-electric.com Website: htt	tps://www.	kenny-electric	.com/
Description of Business: Electrical Contractor			
APPLICANT INFORMATION			
Applicant Name: Connie Richardson		Phone Number:_	307-224-6044
Mailing Address: 3667 Burd Rd Mills, WY			
Street	City	State	Zip
Applicants Signature:  Connie Richardson  Connie Ri	t of my kno	wledge.	_
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 Businesses between 1-5,000 Sq. Feet Businesses between 5,001-10,000 Sq. Feet Businesses greater than 10,000 Sq. Feet Businesses with Fire Alarm, Sprinkler System or Hood Suppression	\$45.00 \$75.00 \$125.00 \$250.00 + \$50.00	PA	ND.

Return completed form to: Mills City Hall 704 4<sup>th</sup> Street Po Box 789 Mills, WY 82644 307-234-6679

OFFICE USE ONLY
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ranted at a meeting of the Mil
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Mills City Hall

720 4th Street

307-234-6679

# APPLICATION FOR Business License

OFFICE USE ONLY

Granted at a meeting of the Mills

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City Council on the

Attest

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 #: ☐ Change of Ownership ☐ Change of Location ☐ Renewal ☐ Expired ☐ New Business GENERAL INFORMATION Key Energy Services Mills WY 87644
City State Physical Address: Mailing Address: 1506 City West BLVD Ste 800 Houston TX 77042

Street City State Zip Business Phone Number: 307 215 4/26 WY Tax ID Number: 20 - 8/25 567 Email Address: 550 @ Key energy, com Website: www. Keyenergy.com Description of Business: Oilfield Service and Penfa APPLICANT INFORMATION Applicant Name: Phone Number: 307 2 (5 4/28 Mailing Address: 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 PAID Businesses between 5,001-10,000 Sq. Feet \$125.00 Businesses greater than 10,000 Sq. Feet \$250.00 OCT 3 0 2024 Businesses with Fire Alarm, Sprinkler System or Hood Suppression + \$50.00 Return completed form to:



# **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 #: 1	completed. Incomplete applications	shan be returned.	Date	10/17/24
New Business	Change of Ownership Change	of Location Re	enewal F Exp	pired
GENERAL INFORMATION	O			
Name of Business:	e Construction, Ir	C.		
Physical Address: 362	33 Burd Rd Street	City	State	82604 Zip
Mailing Address: Po	$500 \times 530$	Mills	State	82644 Zip
Business Phone Number: 36	7-472-3341 WY Tax ID	Number: <u>83</u> ~	026173	8
Email Address: <u>Muvora (</u>	popeconstruction Website:	Pape Constr	uction. co	)m
Description of Business:	Johnnercial Constr	uction		
APPLICANT INFORMATION Applicant Name:	Construction, D	∩ C . PI	none Number:	807-472-324
Mailing Address: Po T	30x 536 Street	Mills	State	82444 Zip
	information is correct and true to the	,		ΖΙμ
There will be a fire inspec	tion fee to be paid at the time the Lic	ense is issued.		<u> </u>
Businesses between 1-5,000 Businesses between 5,001-10 Businesses greater than 10,0	,000 Sq. Feet	\$45.00 \$75.00 \$125.00 \$250.00 + \$50.00	OCT 2 1	2024
Return completed form to:				

Return completed form to: Mills City Hall 704 4<sup>th</sup> Street Po Box 789 Mills, WY 82644 307-234-6679

OFFICE	USE	ONLY

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

Attest \_\_\_\_\_



Po Box 789

Mills, WY 82644 307-234-6679

# APPLICATION FOR Business License

Granted at a meeting of the Mills
City Council on the \_\_\_\_\_

Attest \_\_\_\_\_

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 #: 9801	mpieteu. meompiete	. applications shall b	e returneu.		Date	10/22/24
New Business Chan	ge of Ownership	Change of Loc	ation 💢	Renewal	Exp	pired
GENERAL INFORMATION		1				
Name of Business: 5000 5000	s Drinks, L	1				
Physical Address: 4461 West Street	Highway Stre	et	Mill 5		) / tate	82604 zip
Mailing Address: Box ZS51 Street			Mills	l S	) / tate	82644 Zip
Business Phone Number: 307-25	,	WY Tax ID Number	0		*	
Email Address: Solus prings wy (a)	gmail.com	Website: Sala Sp	ringsdrin	RS. COW	\	
Description of Business: Special 4	y soda sho	)P.	2			
APPLICANT INFORMATION  Applicant Name: Penny Duytor	1			Phone Nur	nber: <u>3</u>	07649-3385
Mailing Address: Box Z551			Mills	l	16	82644
Street			City	S	tate	Zip
I certify that the above informa	tion is correct an	d true to the best	of my kno	wledge.		
Applicants Signature:	hoff					
There will be a fire inspection fee	to be paid at the	time the License i	is issued.	D	and the same	2 0021
Businesses that qualify for a Self-Ass	essment Fire Inspe	ection	\$45.00		OCT	2 2 21124
Businesses between 1-5,000 Sq. Feet			\$75.00			
Businesses between 5,001-10,000 Sq.			\$125.00	102		
Businesses greater than 10,000 Sq. Fe	4		¢250 00			
D : '41 E' AI O : II			\$250.00			
Businesses with Fire Alarm, Sprinkler		uppression +	\$250.00			
Return completed form to:		uppression -				
		uppression +		0	FFICE	USE ONLY



# **APPLICATION FOR Business License**

Attest

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.

	completed incomplete applications shall be retained.	
License #: 9843		Date:_\\

☐ New Business 【	☐ Change of Ownership	☐ Change of Location	☑ Renew	wal 🛮 Exp	pired
GENERAL INFORMATION					
Name of Business: Swagge	r Sneakers & Style	es			
Physical Address: 4839 W.	Highway Street	Casp	er	WY	82601
	Street	City		State	Zip
Mailing Address: PO Box 7	16	Glenro	ock	WY	82637
	Street	City		State	Zip
Business Phone Number: 307	-776-2577	WY Tax ID Number: 01-	0-1345	3	
Email Address: office@swagger23.	com; vlacey@spswyo.com	Website: https://swag	gger23.	com/	
Description of Business: Shoe	e and clothing retai	il sales business			
Description of Business.	g committee of the comm				
***************************************					
APPLICANT INFORMATION					
				3(	7-436-9605
Applicant Name: Veva La			_ Phone	e Number:	07-436-9605
Mailing Address: PO Box 7		Glenro		WY	82637
\$	Street	City		State	Zip
I certify that the above	information is correct ar	nd true to the best of my	knowledg	e.	
Analisanta Signatura	$\mathcal{L}$				
Applicants Signature:	spa a and				
There will be a fire inspec	tion fee to be paid at the	time the License is issue	ed.		
Businesses that qualify for a	Self-Assessment Fire Inspe	ection \$45.00			
Businesses between 1-5,000 S		\$75.00			
Businesses between 5,001-10	The same the same of the same of the same	\$125.0			
Businesses greater than 10,00 Businesses with Fire Alarm, S		\$250.0 suppression + \$50.00			
businesses with the Alarm, e	prinkler bystein or ribbu b	uppression - 450.00			
Return completed form to:					
Mills City Hall				OFFICE (	JSE ONLY
720 4 <sup>th</sup> Street				This license w	as / was not
307-234-6679				Granted at a m City Council on	eeting of the Mills the



## **Council Meeting: November 12, 2024**

	New Contrac	tor Licenses	
	Business Name	Insurance	Contractor ID
9943	Building and Design Inc	N/A	12/31/2024
9944	Lifetime Energy LLC	N/A	12/31/2024
	Renewal Contra	actor Licenses	Contractor ID
9678	307 Electric LLC	N/A	7/1/2025
1081	Andreen Hunt Const Inc.	N/A	N/A
9831	Code-Rite Construction	N/A	12/31/2024
9805	DL Electric	N/A	7/1/2026
880	Elkhorn Electric	N/A	7/1/2025
860	Hick's Plumbing LLC	N/A	12/31/2024
894	Hutch's Hi-Country Plumbing	N/A	12/31/2024
9393	JH Mechanical	N/A	12/31/2024
9675	Kloe's Electrical Solutions, LLC	N/A	7/1/2025
1115	Mega Construction	N/A	12/31/2024
1095	Tri Mountain Construction Inc	N/A	12/31/2024



# 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 #: 9943

Date: //- 4-24

License #: 1 (1)	Date: 1/- 9 - 24
New License Renewal License	Expired License
GENERAL INFORMATION	
Name of Business: Building And Design in	'C.
Physical Address: 4660 CMST'E LN G	ASPAY UN STOP City State Zip
Mailing Address: 4666 Chystie LN Ch	Spor W9 82609 City State Zip
Business Phone Number: 367-234-4364 Cell Number: 36	17-259-8641
Email Address Building pesign @ Brown Website:	
License Classifications: GT of Cappea Class 1 / Ma	
LICENSE ISSUED BY	
City of Mills City of Casper Natrona County  A copy of all licenses must be attached  APPLICANT INFORMATION	, ,
Applicant Name: Mike Cooper	Phone Number: 367-2579-864
Mailing Address: 4060 CY57; ELN CAS	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	d
Return completed form to: Mills City Hall 704 4th Street Po Box 789 Mills, WY 82644 307-234-6679	OFFICE USE ONLY This license was / was not Granted at a meeting of the Mills City Council on the



## City of Casper, Wyoming

#### **Building & Design**

has met the requirements set forth by the City of

Casper and is competent to perform work as a

CLASS I GENERAL CONT.

CONT-1549-2023

This License Expires:

12/31/2024

NATRONA Cyfynning

GCI-29

**Building Department** 

This is to certify that

Building & Design,
Inc.

Can perform work in Natrona County as General Contractor - Class I

This license expires: 12/31/2024

Must be carried on person. Good only when signed by the Building Official



# APPLICATION FOR Contractor License

Attest

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 #: 9944

Date: 10/30/2024

	New License	☐ Renewal License	☐ Expired Lie	cense	
GENERAL INFORMATION					
Name of Business: Lifetime End	ergy LLC				
Physical Address: 196 S 100 W	Suite 203		Logan	UT	84321
Street	t		City	State	Zip
Mailing Address: 196 S 100 W	Suite 203		Logan	. UT	84321
Street			City	State	Zip
Business Phone Number: 435-75	7-5844	Cell Number:			
Email Address: utah.idaho@lifeti	menrg.com	Website:			
License Classifications: Electrica	I Contracto	r & Master Electri	ician		
LICENSE ISSUED BY	***************************************		***************************************	***************************************	
LICENSE ISSUED BY  City of Mills City  APPLICANT INFORMATION		☐ Natrona County tenses must be attached		-	Other
☐ City of Mills	A copy of all lid		d to this applicat	ion	Other 35-757-5844
☐ City of Mills ☐ City  APPLICANT INFORMATION	A copy of all lid		d to this applicat	ion	
☐ City of Mills	A copy of all lid		d to this applicati	ion ne Number:	35-757-5844

City of Casper

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

Issued To:

Jonathan Grimm

Certification(s):

NXTTRCDWHI-02-GL - General Liability

PROFESSIONAL LICENSE CERTIFICATE

Insurance

Mailing Address:

196 S 100 W Suite 203 Suite 203

Logan, UT 84321

License Number:

CONT-002045-2024

License Type:

Contractor License

Issued Date:

10/11/2024

Classification:

Electrical Contractor

**Expiration Date:** 

12/31/2024

Fees Paid:

\$300.00

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

#### Jonathan Grimm | Logout



Suite 203

### Lifetime Energy LLC (C-10402)

196 S 100 W Suite 203, Logan, Utah 84321 Electrical Contractor - Issued: 07/29/2024 - Expires: 07/01/2025

### **Contractors Details**

Click the arrows beside a header to expand or collapse each section of information.

Demographics Organization Staff
Details
Contractor Name: Lifetime Energy LLC
Service Classification:
Active: Yes
Additional Contacts: No
Daylight Savings Time Use: Yes
Time Zone: GMT-7:00 Mountain Time
Email: Logan@lifetimenrg.com
Phone: 435-881-8840
Fax:
Website:
Address: 196 S 100 W

10/30/24, 11:42 AM	Wyoming State Fire Marshal
Logan	
County: Cache	
State: Utah	
Postal Code: 84321	
Country: United States	
Shipping Address:	
City:	
County:	•
State:	
Postal Code:	
Country: United States	
Secondary Phone Number:	
Additional Phone Number:	
Additional Email:	
Certifications	



Service Permit Level:

Training Levels:

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Wyoming Department of Fire Prevention and Electrical Safety 320 West 25th Street, 3rd Floor Cheyenne, WY 82002 Phone: 307-777-7288



#### Department of Fire Prevention & Electrical Safety

#### Jonathan Grimm

#### Master Electrician



Number: M-52968 Issued Date: 07/09/2024
Status: Active Expiration Date: 07/01/20 Expiration Date: 07/01/2027

The information provided on this card is current as of October 30, 2024. Click or Scan the above QR code to retrieve or verify the current applicant status.



307-234-6679

# APPLICATION FOR Contractor License

Attest

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 #: 9678 Date: 9/24/24 New License Renewal License Expired License **GENERAL INFORMATION** 307 Electric LLC Name of Business: 1466 Willer Dr. Casper WY 82604 City State Zi Physical Address: Casper WY 82604
City State Mailing Address: 1466 Willer Dr. Street Business Phone Number: (307) 259-9343 Cell Number: (307) 441-1290

Email Address: jamie 301e lectric - com Website: WWW, 307e lectric - com License Classifications: Electrical Contractor LICENSE ISSUED BY State of Wyoming City of Mills Natrona County City of Casper Other A copy of all licenses must be attached to this application APPLICANT INFORMATION Phone Number(301) 259 - 9843 Applicant Name: 1466 Willer Dr. Casper WY 82604 City Mailing Address: State 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 OFFICE USE ONLY 704 4th Street This license was / was not Po Box 789 Granted at a meeting of the Mills Mills, WY 82644 City Council on the



STATE OF WYOMING DEPARTMENT OF FIRE PREVENTION AND ELECTRICAL SAFETY



307 Electric LLC

LICENSE NUMBER C-41548



EXPIRATION DATE 07/01/2025



## APPLICATION FOR Contractor License

Attest

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 #: 1081 Renewal License New License Expired License GENERAL INFORMATION Name of Business: Andrean Hunt Const. Inc Mailing Address: 4 Business Phone Number: 307-265-1405 Cell Number: Website: License Classifications: LICENSE ISSUED BY City of Casper Natrona County State of Wyoming Other A copy of all licenses must be attached to this application APPLICANT INFORMATION Phone Number: 307-265 / 405 Mailing Address: Po I certify that the above information is confect 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 704 4th Street OFFICE USE ONLY This license was / was not Po Box 789 Granted at a meeting of the Mills Mills, WY 82644 City Council on the 307-234-6679

No: 1081

### CONTRACTOR LICENSE

35.00

In Consideration of the Sum of \$ 35.00,

#### **AUTHORITY IS HEREBY GRANTED BY THE CITY OF MILLS**

To Andreen Hunt Construction, Inc.

To maintain and operate a Construction Business

Located At 5441 Poison Spider

Mailing Address PO Box 1175 Mills WY 82644 within the City of Mills, Natrona County, Wyoming, for a period of time

beginning October 01, 2023 and ending September 30, 2024

IN WITNESS WHEREOF, I, Leah Juarez Mayor of the City of Mills, have hereunto subscribed my signature and

24 day of October, 2023 caused the Seal of the City of Mills to be affixed this

Mayor Trimbuce

Town Clerk



Mills, WY 82644

307-234-6679



## **APPLICATION FOR Contractor License**

Granted at a meeting of the Mills

City Council on the

Attest

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. 0101

License #: 183		Date	10-3024
New License Renewal Lice	nse Expired Lic	cense	
GENERAL INFORMATION			
Name of Business: CODE-RITE CONSTRUCTION	, N		
Physical Address: 85 PRIMROSE ST. Street	CASPER	WY.	82604
		State	Zip
Mailing Address: SAME			
Street	City	State	Zip
Business Phone Number: 307-797-3704 Cell Number	SAME		
Email Address: CONTINECHO GMAIL. Com Website: 1	VIP		
License Classifications: Goworth Contractor IP	LUMBINA CON	TRACTOR	
LICENSE ISSUED BY  City of Mills  City of Casper  A copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all licenses must be attached to the copy of all li			Other
APPLICANT INFORMATION			
Applicant Name: OAN ELSTON	Pho	ne Number:3	7-797-370
Mailing Address: 85 PRIMROSE STI	CASPER	wy,	82604
Street	City	State	Zip
I certify that the above information is correct and true to the Applicants Signature:	best of my knowled	lge.	
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		This license w	JSE ONLY as / was not eeting of the Mills



## City of Casper, Wyoming

#### **Coderite Construction**

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

#### CLASS I GENERAL CONT.

CONT-1660-2023

This License Expires:

12/31/2024



## City of Casper, Wyoming

#### **Dan Elston**

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

**Plumbing Master** 

MAST-0443-2022

This License Expires:

12/31/2024



### City of Casper, Wyoming

#### **Coderite Construction**

has met the requirements set forth by the City of

Casper and is competent to perform work as a

#### CLASS I GENERAL CONT.

CONT-1660-2023

This License Expires:

12/31/2024



## City of Casper, Wyoming

#### **Dan Elston**

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

#### **Plumbing Master**

MAST-0443-2022

This License Expires:

12/31/2024



## City of Casper, Wyoming

#### Central Mechanical

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

> **Plumbing Contractor** CONT-001661-2023

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.

10	completed. Incor	nplete applications shall b	e returned.		,
License #: 9805		/		Date:	11/4/24
	New License	Renewal License	Expired Lice	ense	
GENERAL INFORMATION					
Name of Business: D L	Electric				
Physical Address: 108	W. 25th Street		Casper	W Y State	82604 Zip
Mailing Address: San		oove			
2	Street	21 6	City	State	Zip
Business Phone Number: 3					and the second s
Email Address: dlelectr	10W Jagman	1.com Website: dell	ectric wy.	com	
License Classifications:					
LICENSE ISSUED BY	-				
City of Mills		Natrona County enses must be attached	State of Wyo	•	Other
APPLICANT INFORMATION				(21	259
Applicant Name: Applicant Name:	S (EIMB	ACK	Phon	e Number:	7991
Mailing Address: 1708	W 25	sth st (	ASER	W	S2609
	Street		City	State	Zip
Loortify that the above	information is some	and tour to the beat	of much mountain		
Applicants Signature:		mback	of my knowled	ge.	
There will be a \$35.00 Licens	se fee to be paid at the	time the license is issue	d		
Return completed form to:					
Mills City Hall 704 4 <sup>th</sup> Street				OFFICE U	SE ONLY
Po Box 789				This license was Granted at a mee	eting of the Mills
Mills, WY 82644 307-234-6679				City Council on to	he



#### STATE OF WYOMING DEPARTMENT OF FIRE PREVENTION AND ELECTRICAL SAFETY



## Daniel Edward Leimback MASTER ELECTRICIAN

LICENSE NUMBER M-52608



EXPIRATION DATE 7/1/2026



Mills, WY 82644

307-234-6679

# APPLICATION FOR Contractor License

City Council on the \_\_\_

Attest

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 #: <u>C - 4 4 9</u>			Date	11-8-21
∇ 0	Renewal License	e	icense	
GENERAL INFORMATION				
Name of Business: Elkhorn Electric				
Physical Address: 61 Holmes		Evensulle City	WY	82636
Street				Zip
Mailing Address: P.O. Box 328 Street		m:11s	WY	82644
Street		City	State	Zip
Business Phone Number:	Cell Number:	307-25	8-7207	
Email Address: elkhornine egmal. com	Website:			
License Classifications:				
LICENSE ISSUED BY  City of Mills City of Casper	Natrona County	State of W	yoming	Other
City of Mills City of Casper	Natrona County uses must be attach			Other
City of Mills City of Casper				Other
City of Mills City of Casper  A copy of all licent  APPLICANT INFORMATION	ses must be attach	ed to this applica	tion one Number:	158-7207
City of Mills City of Casper A copy of all licent  APPLICANT INFORMATION  Applicant Name: Mitch Kampa	ses must be attach	ed to this applica	tion one Number:	158-7207
City of Mills City of Casper  A copy of all licent  APPLICANT INFORMATION	ses must be attach	ed to this applica	tion one Number:	158-7207
City of Mills City of Casper  A copy of all licent  APPLICANT INFORMATION  Applicant Name: Mitch Kampa  Mailing Address: P.O. Box 328  Street	ises must be attach	ed to this applica Photography City	one Number: _a	158-7207
City of Mills City of Casper A copy of all licent A copy of all licent APPLICANT INFORMATION  Applicant Name: Mitcl Kamp<  Mailing Address: P.O. Box 328  Street  I certify that the above information is correct	and true to the be	ed to this applica Photography City	one Number: _a	158-7207
City of Mills City of Casper  A copy of all licent  APPLICANT INFORMATION  Applicant Name: Mitch Kampa  Mailing Address: P.O. Box 328  Street	and true to the be	ed to this applica Photography City	one Number: _a	158-7207
City of Mills City of Casper A copy of all licent A copy of all licent APPLICANT INFORMATION  Applicant Name: Mitcl Kamp<  Mailing Address: P.O. Box 328  Street  I certify that the above information is correct	and true to the be	Phone City  est of my knowle	one Number: _a	158-7207
City of Mills City of Casper  A copy of all licent  APPLICANT INFORMATION  Applicant Name: Mitch Ilampa  Mailing Address: P.O. Box 328  Street  I certify that the above information is correct  Applicants Signature: Mitch Ilampa  There will be a \$35.00 License fee to be paid at the time.	and true to the be	Phone City  est of my knowle	one Number: _a	158-7207
City of Mills City of Casper  A copy of all licent  APPLICANT INFORMATION  Applicant Name: Mitch Ilampa  Mailing Address: P.O. Box 328  Street  I certify that the above information is correct  Applicants Signature: Mitch	and true to the be	Phone City  est of my knowle	one Number:a	158-7207

# WY DEPT OF FIRE PREVENTION AND ELECTRICAL SAFETY

## **CONTRACTOR CERTIFICATE**

AWARDS THIS CERTIFICATE TO

Elkhorn Electric Inc

who has satisfactorily met the standards of the State of Wyoming as

administered by the Electrical Board and is hereby certified as

**LEVEL: Electrical Contractor** 

**ISSUE DATE: 06/27/2024** 

**CONTRACTOR NUMBER: C-449** 

**EXPIRATION DATE: 07/01/2025** 

Issued by State of WY Dept of Fire Prevention and Electrical Safety

This certificate documents the successful completion of training and testing at the level identified on the certificate under the provisions identified.

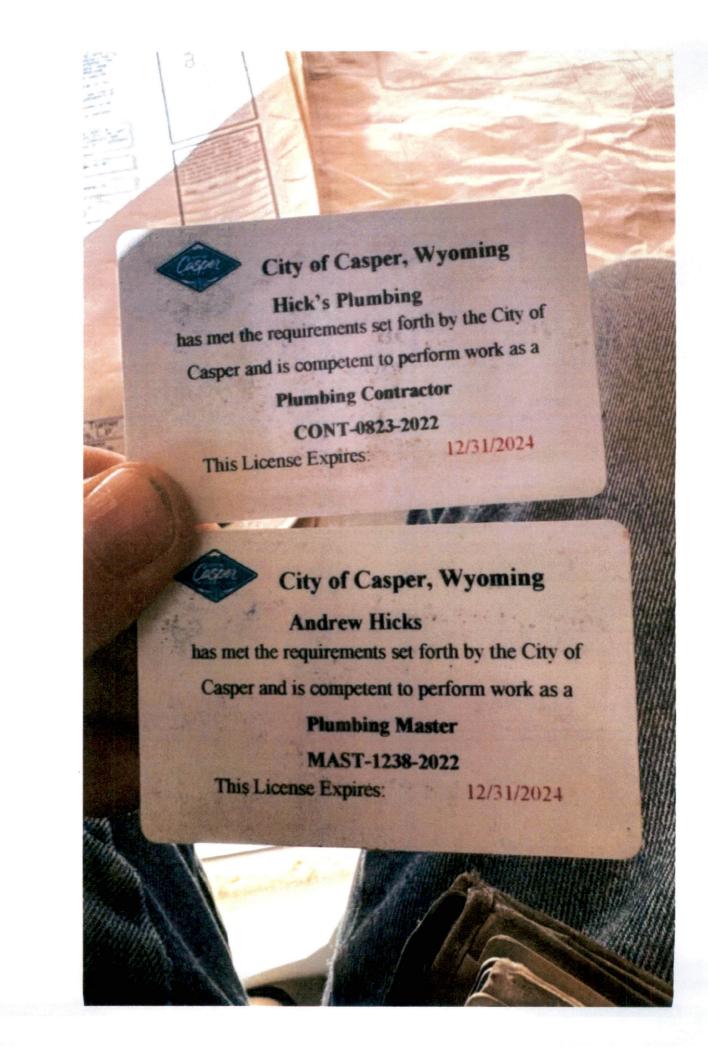




## APPLICATION FOR Contractor License

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 # 860	,			Date	10-24-24
	New License	Renewal License	Expired Li	cense	
GENERAL INFORMATION	N				
Name of Business: H	icks Plumbing	UC		-	
Physical Address: 4			Casper	Wy State	82601 Zip
Mailing Address Po	D Box 50113		Casper	Wy	82601
Business Phone Number:		Cell Number:	307-258	-9001	Σ.,μ
Email Address HACCIPL	umble /102018	Website			
License Classifications:	lumbly 102018 dumbing 1 Con	tractor			
LICENSE ISSUED	) BY				
City of Mills	City of Casper	Natrona County	State of Wy	oming	Other
		nses must be attache			
APPLICANT INFORMATION					
Applicant Name:	ndrew Hicks			ne Number 3	07-258-900
Mailing Address: Po		C	Oper	Wy	82601
	Street		City	State	Zip
I certify that the ab	φνe information is correct	t and true to the be	st of my knowled	dge.	
Applicants Signature	1 // . 1	1 0	in flake		
There will be a \$35.00 Li	cense fee to be paid at the ti	me the license is issu	ed		
Return completed form	to:				
Mills City Hall 704 4th Street					JSE ONLY
Po Box 789 Mills, WY 82644					eeting of the Mills
307-234-6679				City Council on	the





# APPLICATION FOR Contractor License

A Contractor License is required for ANY Contractor doing work within the City of Mills, a Contractor	or's License Application must be
completed. Incomplete applications shall be returned.	1×10-12
License #: <u>\$94</u>	Date: (1) 78/24
☐ New License ☐ Expired License ☐ Expired License	ense
GENERAL INFORMATION	
Name of Business: Mutch's Hi-Canay 19H	
Physical Address: 4/3 N. Washington Caspen	State Zip
Mailing Address: 4/3 N. Washington Casper	C14 82601
Street City	State Zip
Business Phone Number: 307-335-8060 Cell Number:	
Email Address: Admin Sputchs Aumbig. on Website: Mutches plant	sing 1 com
License Classifications: Plumbing/Hogaling	
5	
LICENSE ISSUED BY	The second secon
City of Mills City of Casper Natrona County State of Wyo	
Applicant Name: William Hutchsn Phon	ne Number:307-335-8060
Mailing Address: 4/3 N. Washington St. Casper	Ly 82601
Street	Státe Zip
I certify that the above information is correct and true to the best of my knowled	ge.
	OC1 7 8 707f
There will be a \$35.00 License fee to be paid at the time the license is issued	
Return completed form to:	<b>0</b>
Mills City Hall	OFFICE USE ONLY
704 4th Street	This license was / was not
Po Box 789	Granted at a meeting of the Mills
Mills, WY 82644 307-234-6679	City Council on the



## City of Casper, Wyoming

## Hutch's Hi -Country Plumbing

has met the requirements set forth by the City of

Casper and is competent to perform work as a

## **Plumbing Contractor**

CONT-0818-2022

This License Expires:

12/31/2024



## **APPLICATION FOR Contractor License**

Attest

completed. Incomplete applications shall be returned.	tor's Erectise Application must be
License #: 9675	Date: 10/24/24
GENERAL INFORMATION	OCT 2 8 2024
Name of Business: Klor's Electrical Solutions L.L.C.	
Physical Address: 1425 Chamberlain Rd. Casper Street City	Wy. 82604 State Zip
Mailing Address: S/A Street City	State Zip
Business Phone Number: (307) 258-6520 Cell Number: (307) 258	
Email Address: +trujillo, wei @ yahoo. Comwebsite: N/A	
License Classifications: Commercial, Residential Indus	trial
LICENSE ISSUED BY  City of Mills City of Casper Natrona County State of Wy  A copy of all licenses must be attached to this applicate	
APPLICANT INFORMATION  Applicant Name: Joseph M. Trusillo Pho	one Number: (307) 258-6520
Mailing Address: 1425 Chamberlain Rd. Geper Street City	1.0y. 82604 State Zip
Applicants Signature:  There will be a \$35.00 License fee to be paid at the time the license is issued	dge. 
Return completed form to: Mills City Hall 704 4 <sup>th</sup> Street Po Box 789 Mills, WY 82644 307-234-6679	OFFICE USE ONLY This license was / was not Granted at a meeting of the Mills City Council on the



STATE OF WYOMING DEPARTMENT OF FIRE PREVENTION AND ELECTRICAL SAFETY



#### Kloe's Electrical Solutions LLC

LICENSE NUMBER C-40916



EXPIRATION DATE 07/01/2025



# APPLICATION FOR Contractor License

A Contractor License is required for ANY Contractor doing work within the City of Mills, a Contractor	r's License Application must be
License #: 9393	Date: 10/23/24
New License Renewal License Expired Lice	ense
GENERAL INFORMATION	
Name of Business: JH Machan (Cal	
Physical Address: 425 N Kenwood Casper City	W9 82601 State Zip
Mailing Address: 219 E 10+h St Cappol City	
Business Phone Number: 307-267-2401 Cell Number:	
Email Address: Nensley 219 @ MSU, COW Website:	
License Classifications: PLambing Contractor	
LICENSE ISSUED BY	
City of Mills  City of Casper  Natrona County  State of Wyor  A copy of all licenses must be attached to this application	-
APPLICANT INFORMATION	
Applicant Name: James Hensley Phon	e Number: 267 - 3 002
Mailing Address: 219 € 10 FV ST Casper	WY 87601 State
I certify that the above information is correct and true to the best of my knowledge Applicants Signature:	je.
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 4th Street Po Box 789 Mills, WY 82644 307-234-6679	OFFICE USE ONLY This license was / was not Granted at a meeting of the Mills City Council on the



PC-10

#### **Building Department**



This is to certify that

JH Mechanical

Can perform work in Natrona County as

Plumbing Contractor

This license expires: 12/31/2024

Must be carried on person. Good only when signed by the Building Official



PM-23

#### **Building Department**



This is to certify that Jim Hensley

Can perform work in Natrona County as Plumbing Master

This license expires: December 31, 2024

Must be carried on person. Good only when signed by the Building Official



### JH MECHANICAL

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

Plumbing Contractor CONT-000837-2022

This License Expires: 12/31/2024



## City of Casper, Wyoming

#### JIM HENSLEY

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

Plumbing Master MAST-001237-2022

This License Expires: 12/31/2024





# **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 #: 1115	completea. Incomplete applications shall be returned.	Date: 10/24/24
	□ New License □ Renewal License □ Expired Licen	nse
	Mega Construction  340 W. B street, Suite 201 (asper Street)  P.D. Box 2821  Street  City  Mills  City  The construction  City  City  Coll Number: 307-258-1  Aconstrugal gahoo com Website:	WY 82601 State Zip WY 82644 State Zip 1085
LICENSE ISS		
APPLICANT INFORM Applicant Name:  Mailing Address:	MATION	Number: 307-237-3802 Sy 82644 State Zip
Applicants Signatu	the above information is correct and true to the best of my knowledge ure:	<b>).</b>

Return completed form to: Mills City Hall 704 4<sup>th</sup> Street Po Box 789 Mills, WY 82644 307-234-6679

OFFICE USE ONLY

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

Attest \_\_\_\_\_



GCI-85

### **Building Department**



This is to certify that

Mega Construction
Can perform work in Natrona County as

**General Contractor I** 

This license expires: 12/31/2024

Must be carried on person. Good only when signed by the Building Official



## City of Casper, Wyoming

## Mega Construction

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

CLASS I GENERAL CONT.

CONT-0474-2022

This License Expires:

12/31/2024



# 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.

completed. Incomplete applications shall be returned.	
License #: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Date: 10 25 24
☐ New License ☐ Renewal License ☐ Expired License	
GENERAL INFORMATION	
Name of Business: TRI Mountain Construction, Inc.	
Physical Address: 4309 Quarter Grade Court, Gillette, W. Street Street City State	V 82718 te Zip
Mailing Address: PO Box 2207 Gillette, William Street	$\frac{\sqrt{82717}}{\text{tte}}$
Business Phone Number: (307) 670 - 8353 Cell Number:	
Email Address: admin@trimountounhomes.comwebsite: WWW.trimouwtounhom.	res.com
License Classifications: City of Casper, City of Mills, Natrona #: 6CII-2	1 County 45
LICENSE ISSUED BY	
City of Mills City of Casper Natrona County State of Wyoming  A copy of all licenses must be attached to this application	☐ Other
APPLICANT INFORMATION	
Applicant Name: John C. Alt Phone Numb	per: <u>(307)670-09</u> 0-
Mailing Address: PO Box 2207 Gillette, Wy	82717 te 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:	
Po Box 789  This lice Granted	FICE USE ONLY ense was / was not l at a meeting of the Mills uncil on the

NATRONA Myoming

GCII-45

## Building Department

This is to certify that
TRI Mountain
Homes

Can perform work in Natrona County as General Contractor II

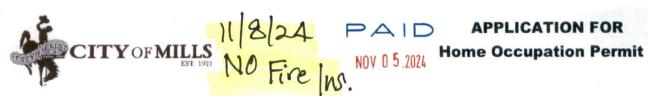
This license expires: 12/31/2024

Must be carried on person. Good only when signed by the Building Official



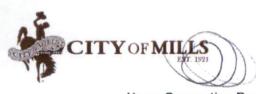
Council Meeting: November 12, 2024

New Home Occupation Permits
Business Name
Blitzed Again Welding Services
Renewal Home Occupation Permits
Business Name



Home Occupation is regulated by City of Mills Zoning Ordinance and must be approved by the Mills City Council. To apply for Home Occupational Permit approval by the City of Mills, a Home Occupation Permit Application must be completed. Incomplete

Permit #: 9730	applications shall be returned.	Date: 1/7/	2024
Applicant Name: 1ra VIS Cos Physical Address: 496/ MRIN	55 Blitzed Again Welding S Teleph	d Permit Services one: 307315 ddress: Bh 121	~ 1
Describe your business in detail:	elding Repairs off site.		
Which of the following best describes	your business:		
On-Site: The primary business actiuse includes, but is not limited to	ivity occurs on the premises at the physical location, offices, telemarketing, crafting, computer incom	on of the dwelling e and similar use	; such a
Off-Site: The primary business acti	ivity occurs off the premises of the dwelling; such ery services, landscaping, contractors and similar	a use includes, b	out is not
	ory contracts, is necessarily, contractors and similar	YES	NO
3. Will a member of the family residing or	n the premises oversee the home occupation?	E	
4. Will there be more than one employee	that is not a resident of the dwelling?		K
5. Will there be any exterior signs, storag	e materials, equipment or other visible evidence?		K
6. Will there be any trash, yard waste or r	recyclable materials stockpiled on-site?		X
<ol> <li>Will there be equipment, commercial v Occupation being stored or parked at t</li> </ol>	ehicles or trailers used in conjunction with your Health the dwelling unit?	ome	R
8. Will all sale of goods or products be ma	ail order or sold at an off-site location?	Г	内
9. Will all equipment, materials and work excluding an attached garage?    Page 1	in progress be confined in the principal dwelling st	tructure,	K
<ol> <li>Will the activity project any obnoxious or adverse conditions upon the adjoini</li> </ol>	s sound, odor, smoke, light or in any way create ar ing properties or neighborhood?	ny nuisance	1
<ol> <li>Will the occupation occupy more than dwelling, exclusive of an attached gara</li> </ol>	n 25% of the total floor area (including a basemen age?	t) of the	R
<ol> <li>Will the activity create a need for off-s the normal and usual levels for other re</li> </ol>	street parking, pedestrian or vehicular traffic in exesidential dwellings?	cess of	8
13. Is there any other additional use or ac	ctivity being carried on at this residence?		8
(Title 17 Land Developmen	Regulations and agree to abide by these regulations Regulations 45.20 Home Occupations)	ons?	
15 List the hours the husiness will oners	ata NO NOULS XII OH	SITA	



9108672380

# APPLICATION FOR Home Occupation Permit

#### Home Occupation Businesses Must Comply with the Following Guidelines

- (a) Number of Home Occupations. One (1) home occupation is allowed in a dwelling.
- (b) Employees. A home occupation shall have no more than one (1) off-site employee. Other off-site employees may be employed by the business, but they may not report to the home. No more than two (2) full-time residents may be employed at the home occupation.
- (c) Habitable Floor Area. The use of the residential dwelling for the home occupation shall be clearly incidental and subordinate to its use for residential purposes.
- (d) Off-Site Effects. There shall be no mechanical equipment used or operations which create or make dust, odor, vibration, noise, or other effects detectable at the property line of the property in which the home occupation is located.
- (e) On-Site Sales. There shall be no products sold on the premises except artist's originals or products individually made to order on the premises, or as part of electronic commerce. Products which are not artist's originals or individually made to order may be constructed on site, using equipment normally found in a residence; however, these products may only be sold at a permitted commercial location.
- (f) Display. There shall be no display of products produced by occupants of the dwelling which are visible in any manner from the outside of the dwelling unit.
- (g) Traffic/Vehicles. The use shall not generate vehicular traffic beyond that which is normal in a residential district nor in any case require the parking of more than one (1) additional vehicle per hour.
- (h) Storage. There shall be no storage of material, products, or supplies out of doors.
- (i) Exterior Appearance. There shall be no remodeling or construction of facilities for the home occupation which changes the external appearance of the residence from a residential to a more commercial appearing structure when viewed from the front of the building. Conversion of a portion of the interior of the structure (e.g., a garage) that does not result in a loss of off-street parking or alters the exterior appearance of the structure may be allowed through issuance of a building permit.
- (j) Signs. Home occupations may display a nameplate not more than two (2) square feet in area, flush-mounted to the residence. No other signage or display that will indicate from the exterior that the building is being utilized in part for any purpose other than that of a dwelling is permitted.
- (k) Visitors and Customers. Visitors and customers shall not exceed those normally and reasonably occurring for a residence, including not more than two (2) business visitors per hour and no more than two (2) at any given time.
- (I) Infrastructure. The home occupation shall not create a need for off-street parking, pedestrian and vehicular traffic, sanitary sewer and storm sewer usage public water usage as well as other municipal services in excess of the normal and usual levels for other residential dwellings.
- (m) Hazardous Materials. Storage of hazardous materials may only be stored in amounts below the thresholds as established by the local Fire Department.

I certify that the all information is correct and true to the best of my knowledge, and I have read and
understood all of the conditions listed.
Applicants Signature:
*Residents must check to ensure that the Home Business does not conflict with your HOA covenants.

A non-refundable application fee of \$45.00 is due upon submittal.

Return completed form to: Mills City Hall 704 4th Street Po Box 789 Mills, WY 82644 307-234-6679

	OFFICE USE ONLY
7	This permit was / was not
	ranted at a meeting of the Mills
C	ity Council on the
Α	ttest