



CITY OF MILLS
EST. 1921

PAID
OCT 23 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 #: 9761 9942

Date: 10/24/24

- New Business Change of Ownership Change of Location Renewal Expired

GENERAL INFORMATION

Name of Business: New Vision Thrift Store

Physical Address: 4505 W Yellowstone HWY
Street City State Zip

Mailing Address: PO Box 2635 Casper, WY 82602
Street City State Zip

Business Phone Number: 307-333-6545 WY Tax ID Number: 83-0313191

Email Address: info@visionbeyondborders.org Website: Visionbeyondborders.org

Description of Business: Thrift Store

APPLICANT INFORMATION

Applicant Name: Patrick Klein Phone Number: 3073336545

Mailing Address: PO Box 2635 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: *Patrick Klein*

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

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



CITY OF MILLS
EST. 1921

PAID
OCT 30 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 #: 9941

Date: 10-30-24

New Business Change of Ownership Change of Location Renewal Expired

GENERAL INFORMATION

Name of Business: Tewes Design Studio

Physical Address: 4656 W. Yellowstone Casper WY 82604
Street City State Zip

Mailing Address: 12850 Vigilante Court Casper WY 82604
Street City State Zip

Business Phone Number: 307-439-3754 WY Tax ID Number: 33-1575075

Email Address: Tewesdesignstudio@gmail.com Website: _____

Description of Business: Selling Wood burnings, laser engraving products. Selling Rocks, jewelry, handmade crafts, and some metaphysical items.

APPLICANT INFORMATION

Applicant Name: James Tewes and Leslie Widstrand Phone Number: 307-439-3754

Mailing Address: 12850 Vigilante Court 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: Leslie Widstrand

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

Businesses that qualify for a Self-Assessment Fire Inspection	\$45.00
Businesses between 1-5,000 Sq. Feet <u>1000 sq. ft</u>	\$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 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 _____
Attest _____



CITY OF MILLS
EST. 1921

PAID
OCT 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 #: 009680

Date: 10-28-24

New Business Change of Ownership Change of Location Renewal Expired

GENERAL INFORMATION

Name of Business: 307 Cowboy Country LLC

Physical Address: 5351 W. Yellowstone Hwy Casper 82601
Street City State Zip

Mailing Address: 1125 S. Elm St Casper 82601
Street City State Zip

Business Phone Number: 307 441 1815 WY Tax ID Number: 834604319

Email Address: 307cowboy@montanashedcenter.com Website:

Description of Business: Shed sales

APPLICANT INFORMATION

Applicant Name: Bryce Reece Phone Number: 307 441 4147

Mailing Address: 1125 S Elm St Casper 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 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 4th Street
Po Box 789
Mills, WY 82644
307-234-6679

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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 #: 1148

Date: 10-18-24

New Business Change of Ownership Change of Location Renewal Expired

GENERAL INFORMATION

Name of Business: CARE Mobile Home Service LLC

Physical Address: 214 Johnson Ave Mills Wyo 82644
Street City State Zip

Mailing Address: POB 1071 Mills Wyo 82644
Street City State Zip

Business Phone Number: 307-267-2223 WY Tax ID Number: _____

Email Address: Remy Dharron@gmail.com Website: _____

Description of Business: Mobile Home repairs

APPLICANT INFORMATION

Applicant Name: Remy Dharron Phone Number: 307-267-2223

Mailing Address: 702 Midwest Ave PO Box 1071 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: Remy Dharron

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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Mills, WY 82644
307-234-6679

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



**APPLICATION FOR
Business License**

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

License #: 788

Date: 10/28/24

New Business Change of Ownership Change of Location Renewal Expired

GENERAL INFORMATION

Name of Business: Dan's Auto Electric

Physical Address: 210 Pendell Blvd. Mills, WY 82644
Street City State Zip

Mailing Address: P.O. Box 2422 Mills, WY 82644
Street City State Zip

Business Phone Number: (307)234-0022 WY Tax ID Number: 01002658

Email Address: dansautoelectric@gmail.com Website: _____

Description of Business: Automotive / Industrial Electrical
Repair Shop

APPLICANT INFORMATION

Applicant Name: Dan Maxwell Phone Number: (307)220-2592

Mailing Address: 6725 Johnson Lateral 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: Dan Maxwell

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:
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<i>This license was / was not</i>
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<i>City Council on the _____</i>
Attest _____



**APPLICATION FOR
Business License**

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

License #: 9808

Date: 10/1/24

New Business Change of Ownership Change of Location Renewal Expired

GENERAL INFORMATION

Name of Business: Exero Well Integrity

Physical Address: 350 Dwyer Drive Mills WY 82604
Street City State Zip

Mailing Address: P.O. Box 1449 Mills WY 82644
Street City State Zip

Business Phone Number: (307)333-0003 WY Tax ID Number: 84-2470580

Email Address: aфаuber@exerousa.com Website: _____

Description of Business: Oil + gas Cementing

APPLICANT INFORMATION

Applicant Name: Ashley Fauber (controller/agent) Phone Number: (307)282-0950

Mailing Address: Po Box 1449 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: Ashley Fauber

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
NOV 04 2024

Return completed form to:
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Mills, WY 82644
307-234-6679

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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 completed. Incomplete applications shall be returned.

License #: 9732

Date: 10/22/24

New Business Change of Ownership Change of Location Renewal Expired

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 Number: _____

Email Address: accoutspayable@kenny-electric.com Website: https://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

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

Applicants Signature: Connie Richardson

Digitally signed by Connie Richardson
DN: cn=US, o=Connie Richard, email=connie@kenny-electric.com
cn=Kenny Electric, cn=Connie Richardson
Location: Casper WY
Reason: I signed to the accuracy and integrity of
this document
Casper, WY 82401
Date: 2024.10.22 16:19:45-0700

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
NOV 04 2024

Return completed form to:
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307-234-6679

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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 completed. Incomplete applications shall be returned.

License #: 1114

Date: 10/31/24

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

GENERAL INFORMATION

Name of Business: Key Energy Services

Physical Address: 1102 Falcon Ave Mills WY 82644
Street City State Zip

Mailing Address: 1500 City West Blvd Ste 800 Houston TX 77042
Street City State Zip

Business Phone Number: 307 215 4128 WY Tax ID Number: 20-8125567

Email Address: bsee@keyenergy.com Website: www.keyenergy.com

Description of Business: oilfield service and rental company

APPLICANT INFORMATION

Applicant Name: Brian See Phone Number: 307 215 4128

Mailing Address: PO Box 1599 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: Brian See

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
OCT 30 2024

Return completed form to:
Mills City Hall
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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 completed. Incomplete applications shall be returned.

License #: 1117

Date: 10/17/24

New Business Change of Ownership Change of Location Renewal Expired

GENERAL INFORMATION

Name of Business: Pope Construction, Inc.

Physical Address: 3623 Burd Rd Mills WY 82604
Street City State Zip

Mailing Address: Po Box 534 Mills WY 82644
Street City State Zip

Business Phone Number: 307-472-3241 WY Tax ID Number: 83-0261738

Email Address: Aurora@popeconstruction.com Website: PopeConstruction.com

Description of Business: Commercial Construction

APPLICANT INFORMATION

Applicant Name: Pope Construction, Inc. Phone Number: 307-472-3241

Mailing Address: Po Box 534 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: Aurora Joto

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
OCT 21 2024

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

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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 #: 9801

Date: 10/22/24

New Business Change of Ownership Change of Location Renewal Expired

GENERAL INFORMATION

Name of Business: Soda Springs Drinks, LLC

Physical Address: 4461 West Highway Street Mills WY 82604
Street City State Zip

Mailing Address: Box 2551 Mills WY 82644
Street City State Zip

Business Phone Number: 307-251-3338 WY Tax ID Number: 01013220

Email Address: sodaspringswy@gmail.com Website: sodaspringsdrinks.com

Description of Business: Specialty soda shop

APPLICANT INFORMATION

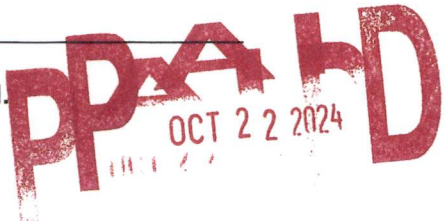
Applicant Name: Perry Dayton Phone Number: 307-689-3385

Mailing Address: Box 2551 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 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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Mills, WY 82644
307-234-6679

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City Council on the _____
Attest _____



Council Meeting: November 12, 2024

New Contractor Licenses			
	<i>Business Name</i>	<i>Insurance</i>	<i>Contractor ID</i>
9943	Building and Design Inc	N/A	12/31/2024
9944	Lifetime Energy LLC	N/A	12/31/2024
Renewal Contractor Licenses			
	<i>Business Name</i>	<i>Insurance</i>	<i>Contractor ID</i>
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



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 #: 9943

Date: 11-4-24

New License Renewal License Expired License

GENERAL INFORMATION

Name of Business: Building and Design inc.

Physical Address: 4060 Crystie LN Casper WY 82609
Street City State Zip

Mailing Address: 4060 Crystie LN Casper WY 82609
Street City State Zip

Business Phone Number: 307-234-4364 Cell Number: 307-259-8641

Email Address: BuildingDesign@BDSMAN.net Website: _____

License Classifications: CIT OF CASPER CLASS 1 / NATRONA COUNTY CLASS 2

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: Mike Cooper Phone Number: 307-259-8641

Mailing Address: 4060 Crystie LN Casper WY 82609
Street City State Zip

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

Applicants Signature: [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
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Mills, WY 82644
307-234-6679

OFFICE USE ONLY
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City Council on the _____
Attest _____



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



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



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 #: 9944

Date: 10/30/2024

New License Renewal License Expired License

GENERAL INFORMATION

Name of Business: Lifetime Energy LLC

Physical Address: 196 S 100 W Suite 203 Logan UT 84321
 Street City State Zip

Mailing Address: 196 S 100 W Suite 203 Logan UT 84321
 Street City State Zip

Business Phone Number: 435-757-5844 Cell Number: _____

Email Address: utah.idaho@lifetimenrg.com Website: _____

License Classifications: Electrical Contractor & Master Electrician

LICENSE ISSUED BY

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

APPLICANT INFORMATION

Applicant Name: Jonathan Grimm Phone Number: 435-757-5844

Mailing Address: 196 S 100 W Suite 203 Logan UT 84321
 Street City State Zip

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

Applicants Signature: Jonathan Grimm

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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City Council on the _____
Attest _____

City of Casper

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

PROFESSIONAL LICENSE CERTIFICATE**Issued To:** Jonathan Grimm**Certification(s):** NXTTRCDWHI-02-GL - General Liability 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



Lifetime Energy LLC (C-10402)

196 S 100 W Suite 203, Logan, Utah 84321

Electrical Contractor -- Issued: 07/29/2024 -- Expires: 07/01/2025

[← Back To Contractors](#)

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

Suite 203

City:

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 

Electrical Contractor 

License Number:
C-10402

Contractor License Level:
Electrical Contractor

Status:
Active

Issue Date:
07/29/2024

Expiration Date:
07/01/2025

Limited or Low Volt Electrical Contractor

License Number:

Contractor License Level:

Status:

Issue Date:

Expiration Date:

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: 07/01/2027

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.



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 #: 9678

Date: 9/24/24

New License Renewal License Expired License

GENERAL INFORMATION

Name of Business: 307 Electric LLC

Physical Address: 1466 Willer Dr. Casper WY 82604
Street City State Zip

Mailing Address: 1466 Willer Dr. Casper WY 82604
Street City State Zip

Business Phone Number: (307) 259-9343 Cell Number: (307) 441-1290

Email Address: jamie@307electric.com Website: www.307electric.com

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: Alex Dickinson Phone Number: (307) 259-9343

Mailing Address: 1466 Willer Dr. Casper WY 82604
Street City State Zip

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

Applicants Signature:

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

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

PAID
OCT 18 2024

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Attest _____



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

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License #: 1081

Date: 10/24/24

New License Renewal License Expired License

GENERAL INFORMATION

Name of Business: Andreen Hunt Const, Inc.

Physical Address: 5441 Poison Spider Rd Mills WY 82644
Street City State Zip

Mailing Address: PO Box 1175 Mills WY 82644
Street City State Zip

Business Phone Number: 307-265-1405 Cell Number: _____

Email Address: office@ahcinc.us Website: _____

License Classifications: _____

LICENSE ISSUED BY

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

A copy of all licenses must be attached to this application

APPLICANT INFORMATION

Applicant Name: Burt Andreen
Andreen Hunt Const, Inc Phone Number: 307-265-1405

Mailing Address: PO Box 1175 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: Burt Andreen

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
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307-234-6679

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Attest _____

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

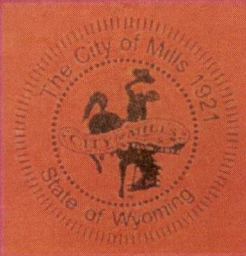
within the City of Mills, Natrona County, Wyoming, for a period of time

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

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



Mayor

Town Clerk



CITY OF MILLS
EST. 1921

PAID
OCT 30 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 #: 9831

Date: 10-30-24

New License Renewal License Expired License

GENERAL INFORMATION

Name of Business: CODE-RITE CONSTRUCTION

Physical Address: 85 PRIMROSE ST. CASPER WY. 82604
Street City State Zip

Mailing Address: SAME
Street City State Zip

Business Phone Number: 307-797-3704 Cell Number: SAME

Email Address: CONTRMECH@GMAIL.COM Website: N/A

License Classifications: GENERAL CONTRACTOR / PLUMBING CONTRACTOR

LICENSE ISSUED BY

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

A copy of all licenses must be attached to this application

APPLICANT INFORMATION

Applicant Name: DAN ELSTON Phone Number: 307-797-3704

Mailing Address: 85 PRIMROSE ST. CASPER WY. 82604
Street City State Zip

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

Applicants Signature: [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
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 _____



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



PAID
NOV 06 2024
NOV 06 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 #: 9805

Date: 11/4/24

New License Renewal License Expired License

GENERAL INFORMATION

Name of Business: DL Electric

Physical Address: 1108 W. 25th Street Casper City WY State 82604 Zip

Mailing Address: same as above Street City State Zip

Business Phone Number: 307-259-7991 Cell Number: same

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

License Classifications: _____

LICENSE ISSUED BY

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

APPLICANT INFORMATION

Applicant Name: DAN LEIMBACK Phone Number: (307) 259 7991

Mailing Address: 1108 W 25th St Casper WY 82604 Street City State Zip

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

Applicants Signature: Daniel Leimback

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 _____
Attest _____



STATE OF WYOMING
DEPARTMENT OF FIRE
PREVENTION AND
ELECTRICAL SAFETY



Daniel Edward Leimback
MASTER ELECTRICIAN

LICENSE NUMBER
M-52608



EXPIRATION DATE
7/1/2026



CITY OF MILLS
EST. 1921

PAID
NOV 08 2024

39, 02

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 #: C-449
880

Date: 11-8-21

New License Renewal License Expired License

GENERAL INFORMATION

Name of Business: Elkhorn Electric

Physical Address: 61 Holmes Evansville WY 82636
Street City State Zip

Mailing Address: P.O. Box 328 Mills WY 82644
Street City State Zip

Business Phone Number: _____ Cell Number: 307-258-7207

Email Address: elkhorninc@gmail.com Website: _____

License Classifications: _____

LICENSE ISSUED BY

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

A copy of all licenses must be attached to this application

APPLICANT INFORMATION

Applicant Name: Mitch Kampe Phone Number: 258-7207

Mailing Address: P.O. Box 328 Mills WY 82636
Street City State Zip

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

Applicants Signature: Mitch Kampe

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 _____
Attest _____

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.



PAID
OCT 24 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 # 860

Date: 10-24-24

New License Renewal License Expired License

GENERAL INFORMATION

Name of Business: Hicks Plumbing LLC

Physical Address: 419 N. Fenway Casper WY 82401
Street City State Zip

Mailing Address: PO Box 50113 Casper WY 82401
Street City State Zip

Business Phone Number _____ Cell Number 307-258-9001

Email Address Hicksplumbing11c2018 Website _____
@gmail.com

License Classifications: plumbing Contractor

LICENSE ISSUED BY

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

A copy of all licenses must be attached to this application

APPLICANT INFORMATION

Applicant Name: Andrew Hicks Phone Number 307-258-9001

Mailing Address: PO Box 50113 Casper WY 82401
Street City State Zip

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

Applicants Signature Andrew Hicks by Stephanie Parker

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 _____*
Attest _____



City of Casper, Wyoming

Hick's Plumbing

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

Plumbing Contractor

CONT-0823-2022

This License Expires:

12/31/2024



City of Casper, Wyoming

Andrew Hicks

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

Plumbing Master

MAST-1238-2022

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 #: 894

Date: 10/28/24

New License Renewal License Expired License

GENERAL INFORMATION

Name of Business: Hutch's Hi-Candy P&H

Physical Address: 413 N. Washington Casper WY 82601
Street City State Zip

Mailing Address: 413 N. Washington Casper WY 82601
Street City State Zip

Business Phone Number: 307-235-8060 Cell Number: NA

Email Address: Admin@hutchsplumbing.com Website: hutchsplumbing.com

License Classifications: Plumbing/Hoisting

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: William Hutchison Phone Number: 307-235-8060

Mailing Address: 413 N. Washington St. Casper WY 82601
Street City State Zip

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

Applicants Signature: [Signature]

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

OCT 28 2024
P.A.I.

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 _____
Attest: _____



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



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 #: 9675

Date: 10/24/24

New License Renewal License Expired License

PAID
OCT 28 2024

GENERAL INFORMATION

Name of Business: Kloe's Electrical Solutions L.L.C.

Physical Address: 1425 Chamberlain Rd. Casper Wy. 82604
Street City State Zip

Mailing Address: S/A
Street City State Zip

Business Phone Number: (307) 258-6520 Cell Number: (307) 258-6520

Email Address: htrujillo.wei@yahoo.com Website: N/A

License Classifications: Commercial, Residential, Industrial

LICENSE ISSUED BY

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

A copy of all licenses must be attached to this application

APPLICANT INFORMATION

Applicant Name: Joseph M. Trujillo Phone Number: (307) 258-6520

Mailing Address: 1425 Chamberlain 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: Joe Trujillo

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 _____

Attest _____



STATE OF WYOMING
DEPARTMENT OF FIRE
PREVENTION AND
ELECTRICAL SAFETY



Kloe's Electrical Solutions LLC

LICENSE NUMBER
C-40916



EXPIRATION DATE
07/01/2025



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 #: 9393

Date: 10/23/24

New License Renewal License Expired License

GENERAL INFORMATION

Name of Business: JH Mechanical

Physical Address: 425 N Kenwood Casper WY 82601
Street City State Zip

Mailing Address: 219 E 10th St Casper WY 82601
Street City State Zip

Business Phone Number: 307-267-2401 Cell Number: _____

Email Address: hensley219@msn.com Website: _____

License Classifications: Plumbing Contractor

LICENSE ISSUED BY

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

A copy of all licenses must be attached to this application

APPLICANT INFORMATION

Applicant Name: James Hensley Phone Number: 267-3002

Mailing Address: 219 E 10th St Casper WY 82601
Street City State Zip

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

Applicants Signature: James Hensley

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

PAID
OCT 23 2024

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



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



City of Casper, Wyoming

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



PM-22

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



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



CITY OF MILLS
EST. 1991

PAID
JUL 30 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 #: 1125

Date: 10/24/24

New License Renewal License Expired License

GENERAL INFORMATION

Name of Business: Mega Construction

Physical Address: 348 W. B street, Suite 201 Casper WY 82601
Street City State Zip

Mailing Address: P.O. Box 2821 Mills WY 82644
Street City State Zip

Business Phone Number: 307-237-3802 Cell Number: 307-258-1085

Email Address: megaconstwy@yahoo.com Website: _____

License Classifications: _____

LICENSE ISSUED BY

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

A copy of all licenses must be attached to this application

APPLICANT INFORMATION

Applicant Name: Dana Theriot Phone Number: 307-237-3802

Mailing Address: P.O. Box 2821 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: *Dana Theriot*

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 _____
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.

License #: 1095

Date: 10/25/24

New License Renewal License Expired License

GENERAL INFORMATION

Name of Business: TR1 Mountain Construction, Inc.

Physical Address: 4309 Quarter Circle Court, Gillette, WY 82718
Street City State Zip

Mailing Address: PO Box 2207 Gillette, WY 82717
Street City State Zip

Business Phone Number: (307) 670-8353 Cell Number: _____

Email Address: admin@trimountainhomes.com Website: www.trimountainhomes.com

License Classifications: City of Casper, City of Mills, Natrona County
#: CONT-000811-2022 #: 1095 #: GC II-45

LICENSE ISSUED BY

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

APPLICANT INFORMATION

Applicant Name: John C. Alt Phone Number: (307) 670-0907

Mailing Address: PO Box 2207 Gillette, WY 82717
Street City State Zip

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

Applicants Signature: John C. Alt

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 _____
Attest _____

NATRONA
COUNTY

W. Geming

GCI-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



CITY OF MILLS
EST. 1921

Council Meeting: November 12, 2024

New Home Occupation Permits

Business Name

Blitzed Again Welding Services

Renewal Home Occupation Permits

Business Name



CITY OF MILLS
EST. 1921

11/8/24

PAID

APPLICATION FOR
Home Occupation Permit

NOV 05 2024

NO Fire Ins.

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 applications shall be returned.

Permit #: 9730

Date: 11/7/2024

State Sales Tax # _____ New Permit Renewal Permit Expired Permit

Applicant Name: Travis Cross Blitzed Again Welding Services Telephone: 3073155711

Physical Address: 4961 Marmon St Email Address: BlitzedAgain@Hotmail

Name of Business: Blitzed Again Welding Services Type of Home Occupation: Mobile/Manufactured

1. Describe your business in detail: Welding repairs off site.

2. Which of the following best describes your business:

On-Site: The primary business activity occurs on the premises at the physical location of the dwelling; such a use includes, but is not limited to, offices, telemarketing, crafting, computer income and similar uses.

Off-Site: The primary business activity occurs off the premises of the dwelling; such a use includes, but is not limited to, mobile services, delivery services, landscaping, contractors and similar uses.

- | | YES | NO |
|--|-------------------------------------|-------------------------------------|
| 3. Will a member of the family residing on the premises oversee the home occupation? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4. Will there be more than one employee that is not a resident of the dwelling? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 5. Will there be any exterior signs, storage materials, equipment or other visible evidence? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 6. Will there be any trash, yard waste or recyclable materials stockpiled on-site? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 7. Will there be equipment, commercial vehicles or trailers used in conjunction with your Home Occupation being stored or parked at the dwelling unit? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 8. Will all sale of goods or products be mail order or sold at an off-site location? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 9. Will all equipment, materials and work in progress be confined in the principal dwelling structure, excluding an attached garage? <u>N/A</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 10. Will the activity project any obnoxious sound, odor, smoke, light or in any way create any nuisance or adverse conditions upon the adjoining properties or neighborhood? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 11. Will the occupation occupy more than 25% of the total floor area (including a basement) of the dwelling, exclusive of an attached garage? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 12. Will the activity create a need for off-street parking, pedestrian or vehicular traffic in excess of the normal and usual levels for other residential dwellings? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 13. Is there any other additional use or activity being carried on at this residence? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 14. Have you read the Home Occupation Regulations and agree to abide by these regulations?
<small>(Title 17 Land Development Regulations 45.20 Home Occupations)</small> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

15. List the hours the business will operate. No Hours. All offsite



CITY OF MILLS
EST. 1921

910 867 2380

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.
- (l) 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

This permit was / was not
Granted at a meeting of the Mills
City Council on the _____

Attest _____