

Council Meeting: December 23, 2024

		ess Licenses	
	Business Name	Fire Inspection	Insurance
9950	Jens Thrift Shop	12/18/2024	N/A
	Renewal Busi	ness Licenses	
	Business Name	Fire Inspection	Insurance
9734	Blue Ice Contracting LLC	12/12/2024	N/A
788	Dan's Auto Electric	12/12/2024	N/A
841	J & G Landscaping Inc	12/11/2024	N/A
9732	Kenny Electric	12/12/2024	N/A
1151	M-3 Industries	12/10/2024	N/A
9501	N.E. Auto Repair	12/12/2024	N/A
9505	Safety-Kleen Systems	12/12/2024	N/A
9848	Sips Coffee Company	12/12/2024	N/A
9844	Top Dog Training Solutions	12/16/2024	N/A



307-234-6679



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.

O O C M	cutions shall be returned.	
License #: 1750		Date: 12-18-24
New Business Change of Ownership	thange of Location ☐ Renev From CaSpe ∕	wal Expired
GENERAL INFORMATION		
Name of Business: Jons Thift Shop		
Physical Address: 476 W. Vellow Street	ene Hwymills	Wy 82644 State Zip
Mailing Address: PO Box 50181	Casper	WY 82605
Street	City	State Zip
Business Phone Number: 307-702-2866 WY 1	Гах ID Number:	
Email Address: Chifer Gear agmil Webs	site: <u>Jengear.</u> C	om
Description of Business: Thiff Shap mainly	ran by teen	s teaching
buisness skills & life skills!	we sell dot	hing household
items & Small Furniture. With	h weekly + n	northly Small
buisness trainings.	· · · · · ·	7
APPLICANT INFORMATION		307-
Applicant Name: Uen Gear	Phone	e Number: <u>702-286</u>
Mailing Address: 820 W 47th St Co	isper Wu 8	32601
Street	City	State Zip
I certify that the above information is correct and true	to the best of my knowledg	je.
Applicants Signature: Juny loa		
Λ .		
There will be a fire inspection fee to be paid at the time t	he License is issued.	
Businesses that qualify for a Self-Assessment Fire Inspection Businesses between 1-5,000 Sq. Feet	\$45.00	
Businesses between 5,001-10,000 Sq. Feet	\$75.00 \$125.00	
Businesses greater than 10,000 Sq. Feet	\$250.00	
Businesses with Fire Alarm, Sprinkler System or Hood Suppres		
Return completed form to:		
Mills City Hall	Г	OFFICE USE ONLY
704 4 th Street Po Box 789		This license was / was not
Mills, WY 82644		Granted at a meeting of the Mills City Council on the



DEC 0 5 2024

APPLICATION FOR Business License

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

License #:_	9	7	34

Po Box 789

Mills, WY 82644

307-234-6679

Date: 12-5-24

Granted at a meeting of the Mills

City Council on the

Attest _

☐ New Business ☐ Change of Ownership ☐ Change of	f Location KRen	ewal Γ Exp	pired
GENERAL INFORMATION			
Name of Business: Blue Ice Contraction	19 LLC		
Name of Business: <u>Blue Toe Contraction</u> Physical Address: <u>805 Morgan</u> Street	mi//s	<i>∭3/</i> Ștate	Zip
Mailing Address: 1854 Westridge Cir Street			8264 Zip
Business Phone Number: 307-462-1407 WY Tax ID N	umber:		
Email Address: <u>Coryells Fule @VCN.cem</u> Website:			
Description of Business: Handyman and Heatin	ng/Coolin	g refl	21/5
	,		
APPLICANT INFORMATION			
Applicant Name: Mike Coryell	Pho	one Number: 3	07-462-140
Mailing Address: 1854 Westridge CIV Street	Casper	- Uls	82604
Street	Citý	State	Zip
i certify that the above information is correct and true to the	best of my knowle	dge.	
Applicants Signature: Mike Coryell	<u> </u>	<u> </u>	
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			
D	\$75.00		
Businesses between 5,001-10,000 Sq. Feet	\$75.00 \$125.00		
Businesses greater than 10,000 Sq. Feet			
•	\$125.00		
Businesses greater than 10,000 Sq. Feet	\$125.00 \$250.00		
Businesses greater than 10,000 Sq. Feet Businesses with Fire Alarm, Sprinkler System or Hood Suppression	\$125.00 \$250.00	OFFICE I	JSE ONLY



704 4th Street

307-234-6679

Mills, WY 82644

Po Box 789

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 #: 788 ☐ New Business Change of Ownership ☐ Change of Location Renewal Expired **GENERAL INFORMATION** Name of Business: Mailing Address: 234-0022 WY Tax ID Number: 01002658 Vic@gwall.comWebsite Description of Business: Automotive / Industrial Flection **APPLICANT INFORMATION** Maxuell Applicant Name: 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 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 OFFICE USE ONLY

License #	<u>84</u>	١		

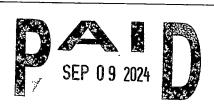
Application for Business License - City of Mills

License #	
	Incomplete Applications will be returned. Complete all fields in REL
Lary Garvi	n, the
-NAME	TITLE (i.e. owner, manager, etc.)
located at 601 Beau Per	
BUSINESS PHYSICAL STRE	EET ADDRESS CITY, STATE, ZIP
□ New	
≱ Renewal	Se Fire Inspection 6.12.5%
□ Expired	トル Inspection \$ 125 ** Inspection fee due after fire inspection
do hereby apply to the City Council of the City	
_	•
Landscape Construction	within the City of Mills for a
DESCRIBE THE TYPE OF BUSI	NESS
period of ONE year, beginning the	day of , 2024
Business mailing address: 4316	W. Hwy St.
City Caspet	(w). Hwy St State _ (w) Y _ Zip _82604
Business phone number: 307-234-3	874 WY Tax ID Number: 03-0302303
Do you travel in and out of Mills, WY for y	your Business?
Do you have any type of equipment, truck	cs, cars, trailers, materials, etc. that will be parked at your
business location in Mills, WY? X YES	
Does your business operate out of a comp	
Does your business operate out of a resid Is your business mobile (i.e. Taxi, Handym	
is your business mobile (i.e. Taki, namuyii	an, Construction, etc.)? X YES D NO
Signed (and) and	Print Name CINSYP. GARVIN
Fee is to be PAI	D before license is approved
	s to operate within the City of Mills. If your main location is not in
Mills, but you come into Mills to	o sell, or to perform a service, a license is required.
Please call the Fire Department at 307-439-124	6 if you have any questions. To schedule your Fire Inspection call
	307.234.8481. OFFICE USE ONLY
AND THE PARTY OF T	A STATE OF THE PARTY OF THE PAR
Fire Inspection Co	mpleted Date:

DATE February 21, 2024

Ji (a Landscaping, The.

BUSINESS NAME (as it will appear on the license)



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

OFFICE USE ONLY

I,, City Clerk of				
the City of Mills Wyoming, do hereby certify that				
the above license was read, examined and was				
/ was not granted at a regular meeting of the				
City Council held on the day of				
, 20				
Attest				
City Clerk				



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 10/22/24 purpleted. Incomplete applications shall be returned.

License #: 4732	shall be returned.	Date:	10/22/24
☐ New Business ☐ Change of Ownership ☐ Change	of Location	newal Expi	red
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:	•		om/
Description of Business: Electrical Contractor			
APPLICANT INFORMATION Applicant Name: Connie Richardson	Pł	none Number: 3	07-224-6044
Mailing Address: 3667 Burd Rd Mills, WY		, or	
Street	City	State	Zip
I certify that the above inc	•	_	
I certify that the above information is correct and true to th	e best of my knowl	edge.	
Applicants Signature: Connie Richardson			_
There will be a fire inspection fee to be paid at the time the Lic	cense is Issued.		
Businesses that quality for a care	\$45.00		
Businesses between 1-5,000 Sq. Feet	\$75.00		
Businesses Detween 5.001.40 no.	\$125.00	pines A	. —
	\$250.00	PA	
Businesses with Fire Alarm, Sprinkler System or Hood Suppression	+ \$50.00	NOV-04	2024
Return completed form to:	,	1101 0 4	
Mills City Hall	^		IOT ONLY
704 4th Street	,	This license w	JSE ONLY
Po Box 789 Mills, WY 82644	•	Granted at a m	eeting of the Mills
307-234-6679		City Council on	the



Mills, WY 82644 307-234-6679

APPLICATION FOR Business License

City Council on the ___

Attest _

	гистве Аррпес	
	Date	e: 10.31.24
Location Ren	ewal	pired
	<u> </u>	
mills	wy.	82604
City	State	Zip
Casper	لائيا	82607
City	State	Zip
umber		
umbor		
Pho	one Number:_	307-262-120
Cosper	ωY	82602
City	State	Zip
	dge.	_
\$45.00		
\$75.00		
\$125.00	•	
\$2E0.00		
\$250.00 + \$50.00		
\$250.00 + \$50.00		
•		
•		USE ONLY was/was not
	Photographic is issued. \$45.00 \$75.00 \$125.00	Phone Number:





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 #: 901		Da	ate: 11-16-2024
New Business Change of Ownership Change of	f Location Fre	newal F	xpired
GENERAL INFORMATION			
Name of Business: N. E. Auta Repair			
Physical Address: 5>25 Poison Spide Rd Street	71; <u>5</u>	luy	87644 Zip
Street	City	State	Zip
Mailing Address: 2914 Herrington Dr.	Cushes	اردي	52604
Mailing Address: 2914 Herrington Dr. Street	City	State	Zip
Business Phone Number: 30>- 267-7637 WY Tax ID N	umber: 10:1622)	
<u> </u>			
Description of Business: Auto Levair & Toning			
•			
		·	
APPLICANT INFORMATION			
Applicant Name: Eric Lindston	Pho	one Number:_	302.262.763)
Mailing Address: 2914 Herrington Or. Street	Easpar	luz	82604
Street	City	State	Zip
I certify that the above information is correct and true to the I	est of my knowle	dae.	
	•		
Applicants Signature:			_
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		
Businesses with the Alahin, Sphirkler System of Hood Suppression	+ \$50.00		
Return completed form to:			
Mills City Hall		0==10=	

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



Mills, WY 82644 307-234-6679

APPLICATION FOR Business License

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 #: <u>9505</u>	completea. Incomplete applications s	snali be returnea.	Date	12/3/24
			_	
New Business	Change of Ownership Change	of Location Rene	wal	ired
GENERAL INFORMATIO	<u>DN</u>			
Name of Business:	Safety-Kleen Systems			
Physical Address:	5afety-Kleen Systems 5231 Poison Sprder	Rd. Mulls	W1_	-8444 7in
	Po Box 219 Street			
Business Phone Number	: 367-259-8447 WY Tax ID!	Number:		
	Gome 2@ Safety-Kken. Lom Website: S			
Description of Business:	Transfer Pacility for	hisness h	reste.	
				-
		· · · · · · · · · · · · · · · · · · ·		
APPLICANT INFORMAT	ION			
	Fred bomes	Pho	ne Number: `	5 6 7-259 -8 1447
				•
Mailing Address:	80 x 219 Street	City	State	Zip
locatify that the a	bove information is correct and true to the	hest of my knowled	lne	
		s best of my knowled	ige.	
Applicants Signature:	Jun 10			-
	spection fee to be paid at the time the Lic	ense is issued.		
Businesses that qualify	for a Self-Assessment Fire Inspection	\$45.00		
Businesses between 1-		\$75.00		
Businesses between 5,	•	\$125.00		
Businesses greater tha		\$250.00		
Businesses with Fire A	larm, Sprinkler System or Hood Suppression	+ \$50.00		
Return completed form	n to:			
Mills City Hall			OFFICE	USE ONLY
704 4th Street			This license v	vas / was not
Po Box 789			Granted at a n	neeting 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.

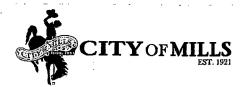
License #: 4848		Da	te: 10 · 20 · 24
☐ New Business ☐ Change of Ownership ☐ Chang	e of Location 🔊	Renewal E	xpired
GENERAL INFORMATION			
Name of Business: SIPS COFFCE, COMPOL	ny		
Physical Address: 801 S. 6 th Street Street	Mills	Wy State	82644 Zip
Mailing Address: 59 S. Conforce Fd. Street	Glenra	State	82637 Zip
Business Phone Number: 307-267-0443 WY Tax II	O Number: 130	02724	
Email Address: Kaylynna Sips coffee Colle convebsite:	sipscoffe	ecollo.co	m
Description of Business: COF-Ce. SWOO			
APPLICANT INFORMATION			
Applicant Name: Koylynn Henson		Phone Number:	307-267-0443
Mailing Address: 59 S. Coyofe, Icd	Glenrack.	WY State	7U 37 Zip
I certify that the above information is correct and true to t	he best of my kno	wledge.	e e tu
Applicants Signature: CUT	January Indiana		_
There will be a fire inspection fee to be paid at the time the L Businesses that qualify for a Self-Assessment Fire Inspection	license is issued. \$45.00		
Businesses that quality for a sen-Assessment Fire inspection Businesses between 1-5,000 Sq. Feet	\$75.00		
Businesses between 5,001-10,000 Sq. Feet Businesses greater than 10,000 Sq. Feet	\$125.00 \$250.00	OCT	2 4 2024
Businesses with Fire Alarm, Sprinkler System or Hood Suppression	·		
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 ______

ttest ____



307-234-6679

APPLICATION FOR Business License

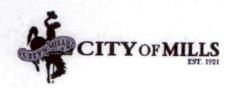
A Business License is required for ANY business to operate within the City of Mills, a Business License Application must be completed. Incomplete applications shall be returned.

A a a a	completed. Incom	plete applications	shall be returned.			
License #: <u>9844</u>				Date:	12-1-24	1
☐ New Busine	ess Change of Ownersh	nip 「Change	of Location Re	newal Exp	ired	
GENERAL INFORMAT	<u>'ION</u>					
Name of Business:	TOP DOG TRAINING	SOLUTION	ς			
Physical Address:	7a3 MIDWES	T AVE	Mills	MY State	8264	4
Mailing Address:	Box 1844		•	State	21p 82644	1
	Street		City	State	Zip	,
Business Phone Numb	er: <u>307 - 941 - 037</u>	WY Tax ID I	Number:			
Email Address: <u>TOPI</u>	DOGTRAINING SOLUTION (MAIL. COM	❷ Website:				
Description of Business	: DOG TRAINING	o, BIHAND	R MODIFICA:	100		. •
APPLICANT INFORMA Applicant Name:	ICHEAL ATK	~	. _% Ph	one Number:_قــ	807.941.03	?70
	BUX 1844					
-	Street		City	State	Zip	
I certify that the	above information is correct	ct and true to the	best of my knowle	edge.	*** • 14	
Applicants Signature						
There will be a fire	inspection fee to be paid at	the time the Lice	ense is issued.	-		
Businesses that quali Businesses between Businesses between	•	nspection	\$45.00 \$75.00 \$125.00		XID.	
Businesses greater th	· ·	od Suppression	\$250.00 + \$50.00	DEC.	- 3. 2021,	
Return completed fo	rm to:					Š
Mills City Hall 704 4 th Street Po Box 789 Mills, WY 82644				OFFICE U This license wa Granted at a me City Council on	eting of the Mills	



Council Meeting: December 23, 2024

	New Contract	or Licenses	
	Business Name	Insurance	Contractor ID
9951	Blue Line Customs LLC	N/A	Yes
	Renewal Contra	actor Licenses	
	Business Name	Insurance	Contractor ID
9767	D-Squared Excavation, LLC	N/A	Yes
9506	Swi, LLC	N/A	N/A



APPLICATION FOR Contractor License

Attest

completed. Incomplete app	vithin the City of Mills, a Con plications shall be returned.	ntractor's License App	lication must be	
License #:		Date:	12/18/24	
New License Ren	ewal License			
GENERAL INFORMATION			1 9 2024	
Name of Business: BUF UNE COST	oms uc			
Physical Address: 1627 E SUNUGHT Street	DR CASPE	State	8260) Zip	
Mailing Address: Same	***************************************			
Street	City	State	Zip	
Business Phone Number: 307-262-2910 Cel	Number:			
Email Address: Caby. Fow ESC arrook. College	bsite:			
License Classifications:CLASS				
LICENSE ISSUED BY				
☐ City of Mills ☐ City of Casper ☐ Natrona A copy of all licenses mu	a County State of state of this apples.		Other	
APPLICANT INFORMATION				
Applicant Name: COBY FOWLES		Phone Number:_30	7-262-2910	
Mailing Address: 1627 E SUNLIGHT DR	CASPE	R my	82601	
Street	City	State	Zip	
I certify that the above information is correct and true Applicants Signature:	ie to the best of my know	vledge.		
There will be a \$35.00 License fee to be paid at the time the li	cense is issued			
Return completed form to:				
Mills City Hall 720 4th Street		OFFICE USE ONLY		
307-234-6679		This license was / was not Granted at a meeting of the Mills City Council on the		

:.

12/19/2024 2:16 PM

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GIII-42

Building Department

Building Official

This is to certify that

Blue Line Customs LLC

Can perform work in Natrona County as

General Contractor III

This license expires: 12/31/2025

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



City of Casper, Wyoming

Blue Line Customs

has met the requirements set forth by the City of

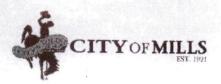
Casper and is competent to perform work as a

CLASS III GENERAL CONT.

CONT-1446-2022

This License Expires:

12/31/2024



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 #: 9506 Date: 12/13/2024 ☐ New License Renewal License ☐ Expired License GENERAL INFORMATION DEC 19 2024 Name of Business: SWi, LLC Physical Address: 6150 W Yellowstone Hwy Casper WY 82604 City State Zip Mailing Address: 6150 W Yellowstone Hwy Casper WY 82604 City State Business Phone Number: 307-754-8166 Cell Number: n/a Email Address: veronica@swiwyoming.com Website: swiwyoming.com License Classifications: Fence and Automated Gate Operators Installation 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: Stephanie Olson 307-637-0001 ext 1002 Phone Number: Mailing Address: 6150 W Yellowstone Hwy Casper WY 82604 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 OFFICE USE ONLY 720 4th Street This license was / was not 307-234-6679 Granted at a meeting of the Mills City Council on the

CITY OF MILLS PO BOX 789 704 FOURTH STREET MILLS WY 82644

307-234-6679

Receipt No: 1.059171

Dec 19, 2024

9506 SWi, LLC

Previous Balance: Business License - Renewals Business License Payment 10-3200-5200 Business License Income 65.00 35.00

Total: New Balance: 35.00 30.00

Check - Jonah Operating Check No: 9073 Payor: SWi, LLC Jotal Applied: 35.00

35.00

Change Tendered:

12/19/2024 8:15 AM