

BUILDING INSPECTION DIVISION

828 Center Avenue, Suite 208 Sheboygan, WI 53081-4442

Phone: (920) 459-3477 Fax: (920) 459-0210

buildinginspection@sheboyganwi.gov

	77	1 LI
Customer No.:	377	
-		

Application Date: No. Approved: ______ on: _____

TO THE BOARD O			S OF THE CITY OF SHE	BOYGAN, WISCONSIN	
				plete applications will be rejected.	_
All Applications requiring Bo	oard of License Exar	niners approv	al must be submitted by Wednes	day prior to the scheduled meeting.	_
The undersigned hereby applies for Annual:	r a (select those t		Temporary Job Location:		
Licens	ie			Certificate	
	Board Meeting	Exam	Moving/Razing	Excavating	
General Contractor	YES	YES	Concrete/Asphalt	Masonry	
W			Steel Erecting	Tuckpointing	a
Carpenter	YES	NO	Roofing	Siding	
		2000	Doors/Windows	Insulation	
Carpenter-Accessory	_ YES	NO	Drywall	Fences	e
do not complete this section) in			Cabinets/Countertops	Waterproofing	_
All of the following questions/	blanks must be	completed		-	
1 First Name OSWA	N OCH	liddle Initial	Last Name	LOSALES	
-0-	BLUFF K			920 377 6935	_
	399AD		Zip(+4)		
	1	_		3001 201	
Email ROSWA	LDO 786	wam	AlioCOM		_
State Credentials: Dwel	ling Contractor: _		Dwellin	g Qualifier:	
Current Employer: SELF	EMPLOYE	ED			
How long have you been empl			months.	Number of employees:	
Work Address 414 B			Work #:	(920) <u>377</u> 6435	
city SHEBS		State	₩ (Zip(+4)	53081-	
6 Work Experience: For whom h			·		
				ARROW DR MANTON	2000
		_			
From Date 2011			E CACHAMON		
For					
From Date			Month on a role of the co	7	
For Date				J.	
From Date				,	
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From Date			10 Date	,	



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6	State in detail the type of construction work you have been doing: HOME REMODELING, DRYWALL HAPGING, MUD AND TAPPING, FLOOR INSTAURTION, TILE
	and the type of construction work you expect to do in the future: EXPAND MY OWN BUSSINES
7	Have you attended a trade school: If yes, give date, name and address of school(s) attended:
8	Did you serve an apprenticeship period?O, If so, state with whom, and dates:
9	Have you ever held a City Construction related license/certification? <u>Noo</u> If YES, list type and dates:
	Have you ever had a City construction related license/certification denied, refused, or revoked? If YES, list date, place and reason:
10	Have you read the Ordinance and all amendments to date which were passed by the Common Council of the City of Sheboygan, Wisconsin, pertaining to the License/Certification you are applying for?
11	If you are granted a license/certification, will you comply with the Ordinance and its amendments, and with the orders of the Inspector? $\sqrt{\epsilon_2}$.
	I, the applicant, mentioned in the foregoing application for a City of Sheboygan Contractor License/Certification, have read each of the foregoing questions from 1 to 11 inclusive; to which I have made answer, and said answers in each instance are true and correct. I understand false statements or willful omission of pertinent information will be grounds for denial or revocation of a license/certificate.
	a) Receipt of City Ordinance Chapter 12 Division 12-II-3 - Contractors b) License applied for expires at end of current calendar year c) It is my responsibility to renew license prior to expiration d) It is my responsibility to submit timely a valid Certificate of Insurance
	DSWAIDS ROSACES Witnessed by: Swylanten
	APPLICANT SIGNATURE 12/04/23 DATE Print Name: Address:



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July 20, 2023

TO ALL BUILDING APPLICANTS:

It is important to emphasize the process and procedures provided for in city and state codes for required inspections. Please read the attached carefully and adhere to the requirements. If a required inspection is not requested of our department, a penalty inspection fee of \$50 will be assessed. The inspection, at your own expense, is still required even if this means having to uncover, dismantle, or excavate the area.

BUILDING INSPECTION DEPARTMENT

After you read the attached required inspections, please sign below. This sheet must accompany your license/certification application and will be kept on file.

Building Contractor - Signature	12/03/23 Date
Building Contractor - please print	

	ITH NO EMPLOYEES, PLEASE READ AND SIGN BELOW TO WAIVE WORKER'S (CORPORATIONS ARE <i>NOT</i> ELIGIBLE FOR THIS OPTION.)
Please be advised that in the future employees are hired, a certificate of insura	have/has no employees at this time. If ance reflecting a policy of workman's compensation will be provided.
Signature:	Date:

Updated: July 20, 2023 Page 3 of 3



Corporate Office: 6903 Arrow Drive * Manitowoc, WI 54220 * Phone (920) 682-5643 * Fax (920) 682-6200

This letter is regarding Oswaldo Rosales.

I have had the pleasure of working with Oswaldo from around 2011 to present. In that time, he has demonstrated competence in the construction systems we used daily.

Oswaldo has demonstrated an understanding and respect for the safe working practices that are demanded by Lakeland Construction and the industry. He is knowledgeable in general building systems including framing and finish applications. Oswaldo understands structural components and application as they relate to a building's overall structural integrity.

I've been witness to him running jobs and interacting with other tradespeople and costumers in a professional and efficient fashion.

Oswaldo has the problem-solving skills for this industry and can see the bigger picture when it comes to construction projects.

Whatever he chooses to do in the future, I'm sure it will add benefit to those involved.

Sincerely,

Grant Stammler, Senior Project Manager Lakeland Construction, Inc. 6903 Arrow Drive Manitowoc, WI 54220

(920) 851-7304

gcsearth@gmail.com

920 377 6435 Osurum Rosacos