



Customer No.: 225 Application Date: 2/04/2024 Approved: _____ on: _____
 Payment _____ Card _____
 Check/Card #: _____ Amount Pd: _____ Bill #: _____ Printed: _____
 In the city of Sheboygan, Wisconsin, for the year ending December 31, 2025. The application/temporary License fee of \$ 75. has been paid to the Building Inspection Division as shown by receipt # _____. The license/certificate fee of \$ _____ is to be made upon application approval for each license/certificate.

----- DO NOT COMPLETE BLANKS ABOVE THIS LINE -----
 Please type or print neatly and legibly in black or dark blue ink - pencil not acceptable. Incomplete applications will be rejected.

TO THE BOARD OF LICENSE EXAMINERS, CITY OF SHEBOYGAN, WISCONSIN

All license applications requiring Board of License Examiners approval must be submitted by Wednesday prior to the scheduled meeting.

The undersigned hereby applies for a (select those that apply):

Annual: _____ Temporary: _____ Temporary Job Location: _____

License		
	Board Meeting	Exam
General Contractor <u>X</u>	YES	YES
Carpenter _____	YES	NO
Carpenter-Accessory _____	YES	NO

Note: Temporary does not attend Board Meeting

Certificate	
Moving/Razing _____	Excavating _____
Concrete/Asphalt _____	Masonry _____
Steel Erecting _____	Tuckpointing _____
Roofing _____	Siding _____
Doors/Windows _____	Insulation _____
Drywall _____	Fences _____
Cabinets/Countertops _____	Waterproofing _____

All of the following questions/blanks must be completed:

1 First Name KRIS Middle Initial R Last Name JOHNSON
 Home Address 1710 N. 11 ST Cell #: (920) 377 0193
 City SHEBOYGAN State WI Zip(+4) 53081 - 2634

2 Preferred Email BUILDWITHKRIS@GMAIL.COM

3 Name of Current Employer: D+D CARPENTRY
 How long have you been employed: years: 1 months: 0 Number of employees: 12
 Business Address 1324 EASTERN AVE Work #: (920) 526-3648
 City PLYMOUTH State WI Zip(+4) 53073 - 2017

4 State Credentials: Dwelling Contractor #: _____ - DC Dwelling Qualifier: _____ - DCQ

5 Work Experience (Do not list contract work): For whom were you employed? How did you gain your construction experience?

For <u>WERNER HOMES</u>	Address <u>SHEBOYGAN</u>
From Date <u>AUGUST</u> , 1998	To Date <u>JANUARY</u> , 2001
For <u>OLLMAN CONSTRUCTION</u>	Address <u>MERQUAN</u>
From Date <u>JANUARY</u> , 2001	To Date <u>APRIL</u> , 2009
For <u>JOHNSON CONSTRUCTION (ME)</u>	Address <u>SHEBOYGAN</u>
From Date <u>APRIL</u> , 2009	To Date <u>MAY</u> , 2015
For <u>KLEIBER CONSTRUCTION</u>	Address <u>PLYMOUTH</u>
From Date <u>MAY</u> , 2015	To Date <u>NOVEMBER</u> , 2023
<u>D+D CARPENTRY</u>	<u>PLYMOUTH</u>
<u>NOVEMBER</u> , 2023	<u>PRESENT</u>

6 State in detail type of construction work you have performed: ROUGH FRAMING, FINISH CARPENTRY, TILE, DRYWALL, WINDOWS, DOORS, DECKS, FENCES, GARAGES, HOUSES, ADDITIONS, CONCRETE FLATWORK, BRICK/STONE MASONRY, FLOORING

Type of construction work you expect to complete in the future: ALL THE ABOVE

7 Have you attended a trade school? NO. If yes, give date, name and address of school(s) attended:

8 Did you serve an apprenticeship period? NO, If so, state with whom, and dates:

9 Have you held a City Contractor related license/certification? YES If YES, list type and dates:
CARPENTER CONTRACTOR 2009-2012?
GENERAL CONTRACTOR 2012-2015

Have you ever had a City contractor license/certification denied, refused, or revoked? NO

If YES, list date 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? YES. Are you familiar with the definition of, and can perform the work required under the City Ordinance? YES.

11 If you are granted a license/certification, will you comply with the Ordinance and its amendments, and with the orders of the Inspector? YES.

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.

I, the applicant, further acknowledge:

- a) Receipt of City Ordinance Chapter 12 Division 12-II-3 - Contractors
- b) License/Certification applied for expires at end of current calendar year
- c) It is my responsibility to renew license prior to expiration until such time as not needed
- d) It is my responsibility to submit timely a valid Certificate of Insurance (COI)

Kris Johnson

APPLICANT SIGNATURE

12-6-2024

DATE

Signature Witnessed by: [Signature]

Print Witness Name: _____


Witness Address: _____

APPLICANT:

It is important to emphasize the process and procedures provided for in city and state codes for required inspections. Please read the "Required Building Inspections" handout carefully and adhere to the requirements. If a required inspection is not requested of an inspector, 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 DIVISION

After you read the "Required Building Inspections" handout, please sign below. **This sheet must accompany your license/certification application and will be kept on file.**



Applicant Signature

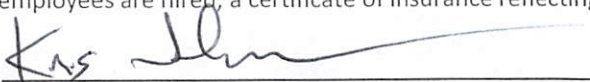
12-6-2024
Date of Signature

KRIS JOHNSON

Applicant (please print name)

FOR SOLE PROPRIETORS, PARTNERSHIPS, OR LLCs WITH NO EMPLOYEES, PLEASE READ AND SIGN BELOW TO WAIVE WORKER'S COMPENSATION REQUIREMENT. (CORPORATIONS ARE NOT ELIGIBLE FOR THIS OPTION.)

Please be advised that JOHNSON CONSTRUCTION/KRIS JOHNSON have/has no employees at this time. If in the future employees are hired, a certificate of insurance reflecting a policy of workman's compensation will be provided.

Signature:  _____ Date: 12-6-2024

TO WHOM IT MAY CONCERN,

I'M REQUESTING TO WAIVE THE TEST
FOR THE GENERAL CONTRACTING LICENCE, #1926

I HAD THE GEN. LIC. BEFORE AND WOULD
LIKE TO SIMPLY GET IT BACK TO
GET BACK TO WORK,

THANKS FOR THE HELP

KRIS JOHNSON

Denied by Board Secretary Eirich 1/21/2025.
last Exam taken 12/2011 or 1/2012
last GC ~~was~~ expired 12/31/2015.



City of

Sheboygan

spirit on the lake.

COPY

February 21, 2012

Kris Johnson
3627 N 34th Street
Sheboygan, WI 53083

RE: Application #1926

Dear Mr. Petrauski:

Your application for General Contractor has been approved by Council.

Please procure this license within 30 days of this notice or it will become void.

If you have any questions, please feel free to call me at (920) 459-3480.

BOARD OF EXAMINERS FOR BUILDING CONTRACTORS

Patrick Eirich
Secretary

PE:tlh

BUILDING INSPECTION

CITY HALL
828 CENTER AVENUE
SUITE 208
SHEBOYGAN, WI 53081

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

www.sheboyganwi.gov



City of

Sheboygan

spirit on the lake.

December 14, 2011

COPY

Kris Johnson
3627 N 34th Street
Sheboygan, WI 53083

RE: Application #1926

Dear Mr. Johnson:

Your application for General Contractor has been approved for examination. Your request to waive the application fee has been denied, so before an exam can be schedule the application fee of \$20.00 would need to be paid.

Please advise me as to time and date you wish to appear to complete your examination. Hours available are from 8:00 A.M. to 5:00 P.M. Allow three hours of time to complete the written test. Test shall be taken by **January 15, 2012.**

In order to properly complete the examination, it is necessary that you bring with you a **calculator, pencil, scale ruler, and UDC Code book and commercial code book.**

BOARD OF EXAMINERS FOR BUILDING CONTRACTORS

PATRICK EIRICH
Secretary

PE:tlh

BUILDING INSPECTION

CITY HALL
828 CENTER AVENUE
SUITE 208
SHEBOYGAN, WI 53081

920/459-3477 (Phone)
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