

# City of Cody Contractors' Board

## AGENDA

Thursday, February 26, 2015 - 12:00 p.m.

Meeting Place: City Hall Conference Room, 1338 Rumsey Avenue, Cody, WY

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### A. **PROCEDURAL**

1. Call to Order
2. Roll Call, excused members
3. Approval of Agenda
4. Approval of Minutes for the January 22, 2015 – Regular meeting

B. Barry Cook – discussion with contractors' group regarding City development and inspection processes.

C. Approval of the following **Contractor's License** reviewed with conditional approval by the Building Official.

#### 1. **High Desert Construction & Restoration – Chad Wagler**

Staff Comments: Staff has reviewed this application and reports that it appears to meet our minimum requirements for a Class C 2015 Siding, Demolition, Framing, Drywall, Roofing Contractor's License.

Proposed Projects: None

Board Interview: None

Action: Review and discuss – Approve, Deny, or Table application

#### 2. **Allphin Construction – Darin Allphin**

Staff Comments: Staff has reviewed this application and reports that it appears to meet our minimum requirements for a Class C 2015 Framing, Siding, Roofing, Concrete Contractor's License.

Proposed Projects: Thiel & Sons residence

Board Interview: None

Action: Review and discuss – Approve, Deny, or Table application

#### 3. **Ben Middleton Construction – Ben Middleton**

Staff Comments: Staff has reviewed this application and reports that it appears to meet our minimum requirements for a Class C 2015 Framing Contractor's License.

Proposed Projects: Thiel & Sons residence

Board Interview: None

Action: Review and discuss – Approve, Deny, or Table application

#### 4. **Monarch Limited, LLC – Kevin Button**

Staff Comments: Staff has reviewed this application and reports that it appears to meet our minimum requirements for a Class A, Category 1A 2015 General Contractor's License.

Proposed Projects: Moss Dental Building

Board Interview: None

Action: Review and discuss – Approve, Deny, or Table application

**5. Bryan Landon Construction – Bryan Landon**

Staff Comments: Staff has reviewed this application and reports that it appears to meet our minimum requirements for a Class C 2015 Concrete Contractor's License.

Proposed Projects: Fed Ex

Board Interview: None

Action: Review and discuss – Approve, Deny, or Table application

**6. E&L Construction – Lee Porter (License Re-Application)**

Staff Comments: Staff has reviewed this application and reports that it appears to meet our minimum requirements for a Class A 2015 General Contractor's License.

Proposed Projects: None

Board Interview: None

Action: Review and discuss – Approve, Deny, or Table application

**7. McG's Roofing, LLC – Brian McGonagle**

Staff Comments: Staff has reviewed this application and reports that it appears to meet our minimum requirements for a Class C 2015 Roofing Contractor's License.

Proposed Projects: None

Board Interview: None

Action: Review and discuss – Approve, Deny, or Table application

**8. First Stage Renovations – Eric Mathias**

Staff Comments: Staff has reviewed this application and reports that it appears to meet our minimum requirements for a Class C 2015 Interior Commercial Demo Contractor's License.

Proposed Projects: None

Board Interview: None

Action: Review and discuss – Approve, Deny, or Table application

**9. JRP Construction – Jim Pollock**

Staff Comments: Staff has reviewed this application and reports that it appears to meet our minimum requirements for a Class A, Category 1A 2015 General Contractor's License.

Proposed Projects: Bennion Dental

Board Interview: None

Action: Review and discuss – Approve, Deny, or Table application

**10. VanTassel Proctor Construction – Ted VanTassel**

Staff Comments: Staff has reviewed this application and reports that it appears to meet our minimum requirements for a Class A, Category 1A 2015 General Contractor's License.

Proposed Projects: Autozone

Board Interview: None

Action: Review and discuss – Approve, Deny, or Table application

**11. Sure Steel, Inc.**

Staff Comments: Staff has reviewed this application and reports that it appears to meet our minimum requirements for a Class C 2015 Steel Erector Contractor's License.

Proposed Projects: Subconsultant to Layton for WPH

Board Interview: None

Action: Review and discuss – Approve, Deny, or Table application

**12. American Traditions, LLC – Steve Peery**

Staff Comments: Staff has reviewed this application and reports that it appears to meet our minimum requirements for a Class C 2015 Masonry Contractor's License.

Proposed Projects: Fed Ex Building

Board Interview: None

Action: Review and discuss – Approve, Deny, or Table application

**D. Public Comments:**

The City Contractors' Board welcomes input from the public. In order for everyone to be heard, please limit your comments to five (5) minutes per person.

**E. New Business:**

1. S.F. 0142 – Passed the Senate. Discussion by WCBO Special Meeting Sunday, February 22, 2015. Discussion by the House Corporations Committee Monday, February 23, 2015.

**E. Ongoing Issues:**

1. Current and Pending Jobs
  - a. Cody Labs Road 2AB – Projected completion March 31
  - b. Bennion Dental Building
  - c. Moss Dental Building
  - d. Fed Ex Building
  - e. Autozone
  - f. Cody Labs Phase 2a update
  - g. Cody Labs Pilot Project
  - h. Walmart Liquor Store
  - i. WPH Medical Records
  - j. WPH Dietary Build Out
  - k. WPH Connector
  - l. WPH Cedar Mountain Renovation
2. January 2015 Building Permit Report.

**F. Matters from Board Members: (announcements, comments, etc.)**

**G. Adjournment:**

The public is invited to attend all Contractors' Board meetings. If you plan to attend or need special accommodations to participate in the meeting, please call the City office at (307)527-7511 at least 24 hours in advance of the meeting to make arrangements.

**City of Cody  
Contractors' Board  
Thursday, January 22, 2015**

A regular meeting of the City of Cody Contractors' Board was held in the Conference Room of City Hall in Cody, Wyoming on Thursday, January 22, 2015 at 12:00 PM.

Present: Roy Holm-Chairperson; Vice Chairperson-Andy Cowan; Tom Quick; Merle Nielson; Gerald Stroh; Mike Kelly; Richard Zickefoose; Scott King, Building Official; Lynn Stutzman, Engineering Administrative Assistant.

Absent: Gene Kelly; Paul Sandbak; Donny Anderson

Attendees: Scott Balyo, Executive Director-Chamber of Commerce; Sheila Enriquez Lucas, Visitor Center & Membership Manager-Chamber of Commerce

Chairman Roy Holm called the meeting to order at 12:00 PM.

New members were introduced. Mike Kelly, Building Contractor position and Richard Zickefoose, HVAC position.

Returning member is Roy Holm, PELS, Civil Engineer/Architect position.

Gerry Stroh made a motion, seconded by Tom Quick, to nominate Mike Kelly as Contractors' Board Chairman for 2015. Vote was unanimous, motion carried.

Tom Quick made a motion, seconded by Gerry Stroh to nominate Andy Cowan as Contractors' Board Vice Chairman for 2015. Vote was unanimous, motion carried.

Outgoing Chairman Roy Holm turned the meeting over to incoming Chairman Mike Kelly.

Roy Holm made a motion, seconded by Merle Nielson, to approve the agenda for the January 22, 2015 regular meeting with modifications. Vote was unanimous, motion carried.

Merle Nielson made a motion, seconded by Andy Cowan, to approve the minutes for the December 18, 2014 regular meeting. Vote was unanimous, motion carried.

Andy Cowan made a motion, seconded by Tom Quick, to approve the license for System Tech, Inc. for a Class B 2015 Low Voltage Electrical Contractor's License. Vote was unanimous, motion carried.

Merle Nielson made a motion, seconded by Richard Zickefoose, to approve the license for LONG Building Technologies for a Class B 2015 HVAC Contractor's License. Vote was unanimous, motion carried.

Public Comments: None

New Business: None

Ongoing Issues:

1. Current and pending jobs:
  - a. West Park Hospital – dietary is completed by the city and the state.
  - b. West Park Hospital – education room review has been started.
  - c. Auto Zone, 610 Yellowstone Ave – Permit is ready. Construction has not started. Contractor is waiting on Quintiliani to demolish existing building.
  - d. Fed Ex, 701 33<sup>rd</sup> Street – New plans were submitted 1/21/15. All the P&Z requirements have not been addressed. Todd has been in contact with the designers.
  - e. Cody Labs Phase 2a, 125 Road 2AB – There were issues regarding fire resistance rating which were resolved last week. Scott is working with the designers on the next phase which is a complicated design. There will be hazardous materials in this phase. Scott will send the plans out to be reviewed by a third-party consultant.
  - f. Two new medical/dental clinics will be coming to Cody. One will be constructed on Yellowstone Ave and the other on Big Horn Ave. Dan Bennion will be forming a corporation with Jim Polk using Jim’s contractor’s license.
  - g. Thad’s Motorcycle Shop – review will be completed by end of January.
2. Detached Storage Shed – Conversation continued from November 2014. The fee was changed to a flat fee of \$50 by Resolution.

Andy Cowan made a motion, seconded by Merle Nielson, to require anchorage on sheds 120 s.f. or greater. If the shed has electrical or plumbing then it will be anchored regardless of square footage. Vote was unanimous. Motion passed.

3. December 2014 and Annual 2014 Building Permit Reports

Matters from Board Members: None

There being no further business to come before the board, Roy Holm made a motion, seconded by Merle Nielson, to adjourn the meeting. Vote was unanimous, motion carried.

Chairperson Mike Kelly adjourned the meeting at 12:47 PM.

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Lynn Stutzman  
Engineering Administrative Assistant

Application Fee: \$50.00

License Fee: \$100.00

CITY OF CODY  
Contractors' License Prequalification Statement

Business Name: High Desert Construction & Restoration LLC Date: Feb 10

DBA: \_\_\_\_\_  Corporation  Partnership  Sole Proprietor

Location: 37 Dixie Lane City: Cody State: WY Zip: 82414

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: 250-0234 Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: chadwaylor@aol.com

License: Class A General Contractor, Category 1 or Category 2 / Class B / Class C

Specific Area of Work: Siding, Frame, Drums, Dry wall, roofing

Which of the following do you have and maintain sufficiently to comply with all Federal, State and Local laws?

State Sales Tax ID: Yes: \_\_\_\_\_ No:  Number: \_\_\_\_\_

Federal ID: Yes:  No: \_\_\_\_\_ Number: 46-3067892

State ID: Yes:  No: \_\_\_\_\_ Number: 2013-000642952

Workmen's Compensation: Yes: \_\_\_\_\_ No:  Number: \_\_\_\_\_

Public Liability and Property Damage: Company: American Restoration Insurance Co  
Expiration Date: 8/1/15 Number: ENV P005029-01

Name of Principals (Including Positions and Local Representatives)

Name: Chad Waylor Position: owner Email: chadwaylor@aol.com Phone: 250-0234

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Have you previously applied for a license in Cody? NO When? \_\_\_\_\_

Good Until: \_\_\_\_\_

How long has your organization been in business? May 2013

Under this name? YTS Other names? \_\_\_\_\_

List experience and/or qualifications which may apply to the license application: \_\_\_\_\_

highdesert247.com

Have you ever filed bankruptcy or failed on any financial obligations? NO

If so, give specifics: \_\_\_\_\_

Have you or other principals failed to complete any work awarded to you? NO

If so, where, when and why? \_\_\_\_\_

Are you familiar with the codes and regulations in Cody concerning your work areas? YES

Name and address of Master License where applicable: \_\_\_\_\_

The above are true and accurate to the best of my knowledge and belief. References may be verified. I am aware that any false statements shall void this application.

Name of Organization

High Desert + Construction & Restoration

By: W. Wagner

State of Wyoming

SS

County of Park

The foregoing instrument was acknowledged before me by Chad Wagner

this 12 day of February, 2015.

Witness my hand and official seal.



Utana Dye  
Notary Public

My commission expires May 6, 2015.

Chairman of the Board \_\_\_\_\_ Approve \_\_\_\_\_ Deny \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



## COMPANY PROJECT HISTORY

Please provide a list of specific projects.

Permits can be verified at Planning & Zoning

Project Name	Owners Name	Address	Phone	Scope	Time Frame
Spk Home	Chad Weyler	Whispering Pines	250-0234	Home Const./foundation, frame, side, roof, trim	2007
Spk Home	Chad Weyler	22 Plannings View Red Lodge, WY	250-0234	Home Const./foundation, frame, side, roof, trim	2008
Road House	Jim Bush	26 Beaver Tail	406-unlisted	Home Const	2009-10
Spk Home	Chad Weyler	36 Park Drive	250-0234	Home Const.	2010
Shop	Scott Feldhausen	14 Talon Drive	587-4179	Shop Const./Foundation, frame, side, roof, <sup>Sheetrock</sup>	2011
House	Rick Watson	10 Whispering Pines	?	Home Const. Frame, roof, side	2009
Barn	Betsy Penwell	403 Southfork	527-4969	Frame, side, roof, deck	2009-10
Home remodel	Betsy Penwell	403 Southfork	527-4969	roof, side, windows, doors, deck	2013
addition	Bobby Stalnaker	37 Dixie Lane		cabin addition/foundation, frame, side, roof	2012
remodel	Eddy Shelton	66 <del>St</del> Stagecoach		<sup>Water Mitigation</sup> Flooring, Kitchen, garage sheetrock	2014
Uptown Motel	Ed Webster	sheridan Ave.		Water Mitigation/Dryout	2014
	Ed Webster	Personal residence		Water Mitigation/Dryout	2014
	John Owen	Stage Coach		Water Mitigation/Dryout	2014
Denny's Guard Mops	Property Management	1328 Beck Ave		Water Mitigation/Dryout	2014

If you need additional space, please attach a separate page.



1938 SHERIDAN AVE  
CODY, WY 82414  
307-587-2202 Phone  
307-527-6038 Fax  
CODY.WY@PROBUILD.COM

**PROBuild**

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2/10/15

To whom it may concern,

Chad Wagler/High Desert has had a charge account with Probuild since 2007. In the past years of knowing Chad and working closely with him on projects I would very highly recommend Chad. He is a man of his word and will get the job done professionally and in a timely manner. Chad is a very professional and honest business man and will go the extra mile so that all parties involved are treated equal. He is a great account and has always been current with us. If you have any questions please feel free to call me.

Thank You,

Rod Schutzman GM  
Probuild Cody, Wy

# Cody Seamless Siding

2326 Sheridan Ave. Cody, WY 82414 – (307) 587-7433 – Fax – (307)587-1277

02/12/2015

**TO WHOM IT MAY CONCERN:**

**IT IS MY PLEASURE TO KNOW CHAD WAGLER, AND I WHOLEHEARTEDLY  
VOUCH FOR HIS PERSONAL CHARACTER.**

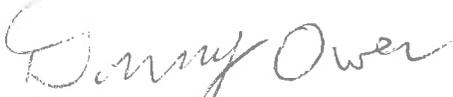
**I HAVE KNOWN AND WORKED WITH CHAD FOR YEARS AND HAVE ALWAYS  
RESPECTED HIM AND FOUND HIM TO BE A VERY HONEST AND KNOWLEDGABLE  
IN THE CONSTRUCTION INDUSTRY.**

  
\_\_\_\_\_  
**GREG POLEY**

To Whom It May Concern,

I have had the pleasure of knowing Chad Wagler, owner High Desert Construction and Restoration for many years. Chad has completed several projects and continues to make positive steps to better his company. High Desert has shown a strong level of integrity and willingness to do their best to provide quality service.

Sincerely,

  
Donny Owen

To Whom It May Concern,

I write this letter in recommendation of High Desert Construction & Restoration. Chad Wagler has worked for me on all stages of construction. I can recommend him highly and without reservation.

In addition, he is very conscientious and detailed. I have found him very helpful in the completion of Residential and Commercial projects.

Regards,

Kim Wagler  
Cedar Mountain Builders  
272-6727

A handwritten signature in black ink that reads "Kim Wagler". The signature is written in a cursive, flowing style with a large initial "K" and a long, sweeping underline.

# COMMON POLICY DECLARATIONS

Policy No.

ENVP005029-01

Renewal of Number

ENVP005029-00

INSURANCE IS PROVIDED BY

**ROCKHILL INSURANCE COMPANY**

KANSAS CITY, MISSOURI

Named Insured and Mailing Address

Agent

High Desert Construction & Restoration LLC

37 Dixie Lane  
Wapiti, WY 82450

American Restoration Insurance, Inc.  
PO Box 2349 Sandy  
Sandy, UT 84070

Policy Period: From  To

12:01 A.M. Standard Time at your Mailing address shown above.  
(Unless otherwise Endorsed)

Business Description: as per endorsement 6014

Form of Business: LLC

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL OF THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE STATED IN THIS POLICY.

THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PARTS FOR WHICH A PREMIUM IS INDICATED. THIS PREMIUM MAY BE SUBJECT TO ADJUSTMENT.

COVERAGE PART	LIMITS OF INSURANCE:	COVERAGE PART (FORM NUMBER)
<b><u>Commercial General Liability</u></b>		
		CG 00 01 12/04
General Aggregate Limit:	2,000,000	
Products/Completed Operations Aggregate Limit:	2,000,000	
Personal and Advertising Injury Limit:	1,000,000	
Each Occurrence Limit:	1,000,000	
Damage to Premises Rented to You Limit:	50,000	
Medical Expense Limit:	5,000	
<b><u>Contractors Pollution Liability Occurrence</u></b>		
		RHIC 6201 01/11
Aggregate Limit:	2,000,000	
Each Contractors Pollution Condition Limit:	1,000,000	
<b><u>Professional Liability</u></b>		
		RHIC 6101 01/11
Aggregate Limit:	2,000,000	
Each Professional Services Incident Limit:	1,000,000	
<i>Covered Professional Services: Project Design for Mold Remediation performed by the named insured for others for a fee.</i>		

**Broker Fee: \$250.00**  
**WY Tax: \$114.57**

	PREMIUM
	\$3,569.00
( 25 % MINIMUM EARNED PREMIUM)	\$893.00
TERRORISM (IF PURCHASED IS 100% MINIMUM EARNED)	N/A
TOTAL MINIMUM & DEPOSIT PREMIUM	\$3,569.00

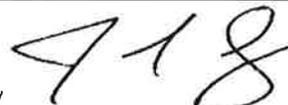
Premium shown is payable: at inception

Additional Form(s) and Endorsement(s) that are made a part of this policy at time of issue and that add, change, exclude or limit coverage are listed below.

\*Omits applicable Forms and Endorsements if shown in specific Coverage Part/Coverage Form Declarations.

Date of Issue: 08/15/2013

Countersigned By



AUTHORIZED REPRESENTATIVE

THESE DECLARATIONS TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE PART DECLARATIONS, COVERAGE PART COVERAGE FORM(S) AND FORMS AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY.

**DEDUCTIBLES**

Commercial General Liability  
 Contractors Pollution Liability Occurrence  
 Professional Liability

See form CG 03 00 01/96

\$5,000.00

\$5,000.00

Each Pollution Condition  
 Each Incident

**RETROACTIVE DATES**

Commercial General Liability  
 Contractors Pollution Liability Occurrence  
 Professional Liability

NONE

NONE

08/01/2013

"This insurance does not apply before the Retroactive Date, if any, shown above. If no Retroactive Date is shown above, the Retroactive Date is the beginning of the policy period for this insurance."

THE FOLLOWING FORMS AND ENDORSEMENTS ARE MADE A PART OF THIS POLICY AT THE TIME OF ISSUE; THEY MAY ADD, DELETE OR LIMIT COVERAGE:

**Common Forms**

IL P 001 01/04 Advisory Notice to Policyholders  
 RHIC 6512 01/14 Notice To Policyholders  
 RHIC 6000 08/11 Common Policy Declarations  
 RHIC 1101 03/11 Signature Endorsement  
 RHIC 6061 01/11 Common Policy Conditions  
 RHIC 6028 01/08 Service of Suit  
 RHIC 6027 01/08 Policy Aggregate Limit Provision  
 IL 00 21 07/02 Nuclear Energy Liability Exclusion Endorsement (Broad Form)  
 RHIC 6068 09/12 Policy Period Minimum Premium and Minimum Earned Premium Endorsement  
 RHIC 6014 01/08 Limitation of Coverage to Designated Operations  
 RHIC 6062 01/11 Supplemental Exclusions  
 RHIC 1112 01/09 Cancellation / Non-Renewal

**Commercial General Liability**

CG 00 01 12/04 Commercial General Liability Coverage Form - Occurrence Form  
 CG 03 00 01/96 Deductible Liability Endorsement  
 CG 22 33 07/98 Exclusion - Testing or Consulting Errors and Omissions  
 CG 21 49 09/99 Total Pollution Exclusion Endorsement  
 CG 20 10 07/04 Additional Insured - Owners, Lessees or Contractors - Scheduled Person or Organization  
 CG 00 67 03/05 Exclusion-Violation of Statutes that Govern Emails, Fax, Phone Calls or Other Methods of Sending Material or  
 RHIC 1017 12/09 Exclusion - Punitive or Exemplary Damages  
 RHIC 6058 01/10 Amended Waiver of Subrogation  
 CG 22 43 07/98 Exclusion - Engineers, Architects or Surveyors  
 CG 21 86 12/04 Exclusion - Exterior Insulation and Finish Systems  
 RHIC 6032 02/12 Exclusion - Professional Services  
 RHIC 6031 01/08 Exclusion - Designated Operations  
 RHIC 6048 02/12 Primary/Non-Contributory Coverage - Blanket - When req. by written contract  
 RHIC 6501 04/08 Exclusion of Certified Acts of Terrorism  
 RHIC 6514 01/14 Conditional Exclusion of Terrorism  
 CG 20 37 07/04 Additional Insured - Owners, Lessees or Contractors - Completed Ops  
 CG 21 34 01/87 Exclusion - Designated Work  
 RHIC 6056 01/11 Toxic Drywall Exclusion  
 IL1201 11/85 Manuscript Endorsement  
 RHIC 1126 01/14 Independent and/or Subcontractor Restriction - Deductible Form

**Contractors Pollution Liability Occurrence**

RHIC 6201 01/11 Contractors Pollution Liability Coverage Form - Occurrence  
 RHIC 6247 11/13 Mold Coverage Endorsement  
 RHIC 6226 06/11 Additional Insured - Owners, Lessees or Contractors (Broad Wording)

RHIC 6058 01/10 Amended Waiver of Subrogation  
RHIC 6248 06/11 Exclusion - Exterior Insulation and Finish Systems - Amended  
RHIC 6048 02/12 Primary/Non-Contributory Coverage - Blanket - When req. by written contract  
RHIC 6501 04/08 Exclusion of Certified Acts of Terrorism  
RHIC 6514 01/14 Conditional Exclusion of Terrorism  
RHIC 6047 04/08 Exclusion - Designated Operations  
RHIC 6240 01/11 Toxic Drywall Exclusion  
RHIC 6242 01/11 Transportation Pollution Liability Endorsement

**Professional Liability**

RHIC 6101 01/11 Professional Liability Coverage Form - Claims Made  
RHIC 6105 06/11 Additional Insured - Owners, Lessees or Contractors  
RHIC 6116 04/08 War or Terrorism Exclusion  
RHIC 6047 04/08 Exclusion - Designated Operations  
RHIC 6120 06/11 Mold Coverage Endorsement

**SIGNATURE ENDORSEMENT**

By signing and delivering the policy to you, we state that it is a valid contract when countersigned by our authorized representative.

**ROCKHILL INSURANCE COMPANY**  
Kansas City, Missouri



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James A. Yano  
Secretary



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Robert P. Restrepo, Jr.  
President

Application Fee: \$50.00

License Fee: \$100.00

CITY OF CODY  
Contractors' License Prequalification Statement

Business Name: Allphin Construction LLC Date: 02-03-15

DBA: \_\_\_\_\_  Corporation LLC  Partnership  Sole Proprietor

Location: 1002 2nd St. City: Cody State: WY Zip: 82414

Mailing Address: PO Box 1042 City: Cody State: WY Zip: 82414

Phone: 307-578-8493 Cell: 307-899-2488 Fax: \_\_\_\_\_

E-mail: allphinconstructionllc@gmail.com

License: Class A General Contractor, Category 1 or Category 2 / Class B / Class C

Specific Area of Work: Framing, Siding, Roofing, Concrete

Which of the following do you have and maintain sufficiently to comply with all Federal, State and Local laws?

State Sales Tax ID: Yes: \_\_\_\_\_ No: X Number: \_\_\_\_\_

Federal ID: Yes: X No: \_\_\_\_\_ Number: 45-0471694

State ID: Yes: \_\_\_\_\_ No: X Number: \_\_\_\_\_

Workmen's Compensation: Yes: \_\_\_\_\_ No: X Number: \_\_\_\_\_

Public Liability and Property Damage: Company: Farm Bureau Ins.

Expiration Date: 8-15-15 Number: BPO06086

Name of Principals (Including Positions and Local Representatives)

Name: Darin Allphin Position: owner Email: allphinconstructionllc@gmail.com Phone: 307-899-2488

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Have you previously applied for a license in Cody? No When? \_\_\_\_\_

Good Until: \_\_\_\_\_

How long has your organization been in business? 13 years

Under this name? No Other names? Wild West Insulation LLC

List experience and/or qualifications which may apply to the license application: \_\_\_\_\_

I have been in the Building trade since a teenager. I have Framed, ran jobs rooted, Drywalled, trim, siding, concrete, masonry, painting. I have previously done about everything in the building trade.

Have you ever filed bankruptcy or failed on any financial obligations? \_\_\_\_\_

If so, give specifics: No

Have you or other principals failed to complete any work awarded to you? \_\_\_\_\_

If so, where, when and why? No

Are you familiar with the codes and regulations in Cody concerning your work areas? \_\_\_\_\_

Name and address of Master License where applicable: Yes

The above are true and accurate to the best of my knowledge and belief. References may be verified. I am aware that any false statements shall void this application.

Name of Organization

Allplan Construction LLC

By: Darin Allphin

State of Wyoming

SS

County of Park

The foregoing instrument was acknowledged before me by Darin Allphin

this 3rd day of February, 2015.

Witness my hand and official seal.



Kelle Cook aka Schmidt  
Notary Public

My commission expires January 11, 2017

Chairman of the Board \_\_\_\_\_ Approve \_\_\_\_\_ Deny \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**COMPANY PROJECT HISTORY**

Please provide a list of specific projects.

Project Name	Owners Name	Address	Phone	Scope	Time Frame
The Cody	Mrs. Sufino Inc		212-2777	Build new Hotel - Frame, Insulation, Trim	1 year 6 months
<del>Theresa Dowdy</del>	—	—	—	—	<del>4 months</del>
Remodel	Sheresa Dowdy			Remodel	4 months
Mandisa Lane	Cory Lee		904-208-0991	New subdivision, Frame, side, trim Supervise	5 years

If you need additional space, please attach a separate page.

**PERSONAL WORK HISTORY**

**Please provide your personal work history to establish your minimum required time. Begin with your most recent employer first. List all positions you have held. Account for all the time between your first and last construction related employment listing whether the work done was construction related or not. Please note that time worked MUST be verifiable. It may be easier to have time worked documented in letter form from former employers. Failure to provide this information may be cause to delay or cause denial by the Contractor's board.**

Employer Name	Address	Phone	Position Held and Primary Duties (i.e. project mgr, superintendent Foreman carpenter, laborer, etc.)	Time Frame
Cowan Const	Gulch	867-9829	Carpenter	3 years
JP Drywall		250-2104	Drywall Hanger & Finisher	4 years
MU Alphin Inc	86 Rolling Hills Dr	272-2777	Foreman, carpenter, superi	10 years

**If you need additional space, please attach a separate page.**



MOUNTAIN WEST FARM BUREAU MUTUAL INSURANCE COMPANY  
P.O. BOX 1348 LARAMIE, WYOMING 82073-1348

**BUSINESSOWNERS COMMON POLICY DECLARATION**

8/16/14

WS150

ALLPHIN CONSTRUCTION LLC  
DARIN ALLPHIN  
PO BOX 1042  
CODY WY 82414-1042

POLICY NUMBER BPO06086  
COUNTY 15 AGENT 211  
TERM CONT JEANNA KENNEDY

BUSINESS DESCRIPTION: CARPENTRY

PACKAGE TYPE: C CONTRACTORS - INSURED IS A LIMITED LIABILITY COMPANY

POLICY PERIOD FROM 8/15/14 TO 8/15/15 AT 12.01 A.M. STANDARD  
TIME AT YOUR MAILING ADDRESS SHOWN ABOVE.

This policy consists of the following coverage parts for which a  
premium is indicated. This premium may be subject to adjustment.

BUSINESSOWNERS PROPERTY COVERAGE PART . . . . .	138.00
BUSINESSOWNERS CRIME COVERAGE PART . . . . .	.00
BUSINESSOWNERS GENERAL LIABILITY COVERAGE PART . . . . .	294.00
COMMERCIAL AUTO COVERAGE PART . . . . .	1,305.00
COMMERCIAL INLAND MARINE COVERAGE PART . . . . .	722.00
COMMERCIAL UMBRELLA COVERAGE PART . . . . .	.00
COMMERCIAL TERRORISM COVERAGE PART . . . . .	30.00
TOTAL ANNUAL PREMIUM	2,489.00

**\*\* IMPORTANT \*\*** Please attach this update to your original insurance policy

The premium shown in the declarations was computed based on rates in  
effect at the time the policy was issued. On each renewal, continuation,  
or anniversary of the effective date of this policy, we will compute  
the premium in accordance with our rates and rules then in effect.

Coverage FORMS and ENDORSEMENTS made part of this policy at time of issue -

- FO-10.111W(04/94) FO-10.112(04/94) FO-10.115(04/94)
- FO-10.121(04/88) FO-10.116(04/88) FO-10.117(04/94)
- 20.202(04/96) CA 00 01(07/97) CA 99 03(07/97) CA 99 23(12/93)
- CA 21 23(10/97) CA 21 68(03/94) CA 21 71(01/88) 30.100(04/88)
- CA 99 44(12/93) 30.102(04/96) 30.106(04/96) CM 00 01(06/95)
- CM 01 09(11/85) 40.100(03/85) 40.102(03/85) 40.111(04/88)
- BP 00 03(01/10) BP IN 01(01/10) 20.212(10/04) BP 01 28(01/10)
- BP 05 01(07/02) BP 04 17(01/10) BP 05 17(01/06) BP 05 23(01/08)
- BP 05 77(01/06) BP 06 41(11/06) BP.225(10/12) BP.236(10/12)
- BP.247(10/12) BP.249(10/12) BP.250(10/12) BP.251(10/12)
- BP 04 39(07/02) BP 07 04(01/06) BP 10 05(07/02) BP.231(10/04)
- BP.232(10/04) BP 07 01(01/10) BP 04 93(01/06) BP.245(10/12)
- 10.005(06/06)



MOUNTAIN WEST FARM BUREAU MUTUAL INSURANCE COMPANY  
P.O. BOX 1348 LARAMIE, WYOMING 82073-1348

**BUSINESSOWNERS COMMON POLICY DECLARATION**

8/16/14

WS150

ALLPHIN CONSTRUCTION LLC  
DARIN ALLPHIN  
PO BOX 1042  
CODY WY 82414-1042

POLICY NUMBER BPO06086  
COUNTY 15 AGENT 211  
TERM CONT JEANNA KENNEDY

BUSINESS DESCRIPTION: CARPENTRY

PACKAGE TYPE: C CONTRACTORS - INSURED IS A LIMITED LIABILITY COMPANY

POLICY PERIOD FROM 8/15/14 TO 8/15/15 AT 12.01 A.M. STANDARD  
TIME AT YOUR MAILING ADDRESS SHOWN ABOVE.

MORTGAGE CLAUSE- If a MORTGAGE and/or LOSS PAYABLE clause(s) shall  
be applicable.

09846 SEC III  
SUNLIGHT FEDERAL CREDIT UNION  
1601 S PARK DR  
PO BOX 190  
CODY WY 82414-0190

85207 SEC III  
SUNLIGHT FEDERAL CREDIT UNION  
PO BOX 924130  
FORT WORTH TX 76124-4130

39201 SEC III  
BANK OF AMERICA  
PO BOX 2759  
JACKSONVILLE FL 32203-2759

09846 SEC IV  
SUNLIGHT FEDERAL CREDIT UNION  
1601 S PARK DR  
PO BOX 190  
CODY WY 82414-0190

This declaration replaces all declarations previously issued to  
you for this policy. Assignment of this policy shall not be  
valid unless we give our written consent.

FO-10.111W(04/94)



BUSINESSOWNERS ADDITIONAL POLICY DECLARATION

WS1441

BUSINESSOWNERS PROPERTY COVERAGE FORM

EFFECTIVE 8/15/14		NAME ALLPHIN CONSTRUCTION LLC		8/16/14		
POLICY NO. BPO06086						
LOC. NO.	BLD. NO.	DESCRIPTION/ OCCUPANCY	DED.	LIMIT OF INSURANCE	ANNUAL PREMIUM	MORT. NO.
00	00	TERRORISM			30.00	
00	00	CONTRACTOR TOOLS BLANKET	500	3,000	.00	
00	00	CONTRACTOR INSTALLATION PROPERTY AT EACH COVERED JOB SITE PROPERTY AT ALL COVERED JOB SITES	500	3,000 9,000	.00	
00	00	CONTRACTORS BASE COVERAGE	500		99.00	
01	01	BUSINESS PERSONAL PROPERTY PERMANENT YARD COVERED CAUSES OF LOSS-SPECIAL FORM. REPLACEMENT COST COVERAGE APPLIES. COINSURANCE = 80% WIND/HAIL DEDUCTIBLE - NONE MECHANICAL BREAKDOWN COVERAGE APPLIES	500	5,000	32.00	INCL.
		LOCATION-1802 29TH ST CODY, WY 82414				
01	01	BUSINESS PERSONAL PROPERTY SHOP/STORAGE COVERED CAUSES OF LOSS-SPECIAL FORM. REPLACEMENT COST COVERAGE APPLIES. COINSURANCE = 80% WIND/HAIL DEDUCTIBLE - NONE MECHANICAL BREAKDOWN COVERAGE APPLIES	500	1,000	7.00	INCL.
		LOCATION-1802 29TH ST CODY, WY 82414				
01	01	BUSINESS INCOME ACTUAL LOSS SUSTAINED	N/A			
TOTAL ANNUAL PREMIUM					168.00	

THIS ENDORSEMENT IS ATTACHED TO AND MADE PART OF YOUR POLICY IN RESPONSE TO THE DISCLOSURE REQUIREMENTS OF THE TERRORISM RISK INSURANCE ACT. THIS ENDORSEMENT DOES NOT GRANT ANY COVERAGE OR CHANGE THE TERMS AND CONDITIONS OF ANY COVERAGE UNDER THE POLICY.

## POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE

### SCHEDULE

Terrorism Premium (Certified Acts) \$
---------------------------------------

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.
--

**A. Disclosure of Premium**

In accordance with the federal Terrorism Risk Insurance Act, we are required to provide you with a notice disclosing the portion of your premium, if any, attributable to coverage for terrorist acts certified under the Terrorism Risk Insurance Act. The portion of your premium attributable to such coverage is shown in the Schedule of this endorsement or in the policy Declarations.

**B. Disclosure of Federal Participation in Payment of Terrorism Losses**

The United States Government, Department of the Treasury, will pay a share of terrorism losses insured under the federal program. The federal share equals 85% of that portion of the amount of such insured losses that exceeds the applicable insurer retention. However, if aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a Program Year (January 1 through December 31), the Treasury shall not make any payment for any portion of the amount of such losses that exceeds \$100 billion.

**C. Cap On Insurer Participation In Payment Of Terrorism Losses**

If aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a Program Year (January 1 through December 31) and we have met our insurer deductible under the Terrorism Risk Insurance Act, we shall not be liable for the payment of any portion of the amount of such losses that exceeds \$100 billion, and in such case insured losses up to that amount are subject to pro rata allocation in accordance with procedures established by the Secretary of the Treasury.

You have the option of rejecting terrorism insurance coverage. If you choose to do so, you must formally decline and remit this form to Mountain West Farm Bureau Mutual Insurance Company.

**Rejection of Terrorism Insurance Coverage**

I hereby decline to purchase terrorism coverage for certified acts of terrorism. I understand that I will have no coverage for losses resulting from certified acts of terrorism.
---

\_\_\_\_\_  
Policyholder/Applicant's Signature

\_\_\_\_\_  
Policy Number

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date



BUSINESSOWNERS ADDITIONAL POLICY DECLARATION  
BUSINESSOWNERS GENERAL LIABILITY COVERAGE PART

WS1532

EFFECTIVE 8/15/14  
POLICY NO. BP006086 NAME ALLPHIN CONSTRUCTION LLC 8/16/14

LIMITS OF INSURANCE

LIABILITY AND MEDICAL EXPENSES OCCURRENCE LIMIT	1,000,000
LIABILITY AND MEDICAL EXPENSES GENERAL AGGREGATE LIMIT	2,000,000
PRODUCTS/COMPLETED OPERATIONS AGGREGATE LIMIT	2,000,000
DAMAGE TO PREMISES RENTED TO YOU LIMIT	50,000
UNLESS A HIGHER LIMIT IS SHOWN FOR A SPECIFIC LOCATION IN SECTION 1	
MEDICAL EXPENSE LIMIT PER PERSON	5,000
LIABILITY DEDUCTIBLES PER OCCURRENCE PROPERTY DAMAGE	1,000

THE FOLLOWING DISCLOSES ALL INSURED LOCATIONS AND ACTIVITIES KNOWN TO EXIST AT THE COVERED EFFECTIVE DATE OF THIS POLICY. ANY UNDECLARED LOCATIONS OR ACTIVITIES ARE NOT COVERED.

LOC. NO.	BLD. NO.	DESCRIPTION	ANNUAL PREMIUM	MORTG
01	01	CARPENTRY - CONSTRUCTION OF RESIDENTIAL PROPERTY - LOC. 1802 29TH ST CODY, WY 82414		
TOTAL PREMIUM			294.00	

FO-10.115 (04/94)



BUSINESSOWNERS - ADDITIONAL POLICY DECLARATION WS1464  
BUSINESS AUTO COVERAGE FORM

EFFECTIVE 8/15/14  
POLICY NO. BPO06086

ALLPHIN CONSTRUCTION 8/16/14

**\*\*ITEM THREE\*\***  
SCHEDULE OF COVERED AUTOS YOU OWN

ITEM	YR	MAKE	TYPE	SERIAL NO. OR DESCR.	NOTES	SPECIFIED CAUSES OF LOSS	COMP DED.	COLL DED.	ANNUAL PREMIUM
02	2007	MIRA	TRLER	5M3BE242171029926 MIRAGE 8.5 CARGO	C LIEN NO 09846	*	250	500	85.00
03	2001	UNEX	TRLER	48B500F2511051994 UNEX CARGO TRAILER	C	*	250	500	46.00
06	2011	HILL	DUMP	1THABABK5B1025863 TRAILER	C LIEN NO 85207	*	250	500	109.00
07	2013	YARS	TRLER	1TH5B5EK7D1026553	C	*	250	500	108.00
08	2014	DODG	RAM	3C63R3NL1EG220250 LIEN NO 39201 R. REIM PER DAY= 50 #DAYS= 10 TOW LIM=250	BE	*	250	500	932.00
<b>**ITEM FIVE**</b> NON-OWNERSHIP LIABILITY									25.00

TOTAL ANNUAL PREMIUM= 1,305.00

LIEN NO LIENHOLDER

09846 SUNLIGHT FEDERAL CREDIT UNION  
1601 S PARK DR  
PO BOX 190  
CODY WY 82414-0190

85207 SUNLIGHT FEDERAL CREDIT UNION  
PO BOX 924130  
FORT WORTH TX 76124-4130

39201 BANK OF AMERICA  
PO BOX 2759  
JACKSONVILLE FL 32203-2759

- NOTES -

- B - TOWING IS INCLUDED
- C - MEDICAL AND UM COVERAGE NOT INCLUDED FOR THIS ITEM
- E - RENTAL REIMBURSEMENT INCLUDED
- \* - COVERAGE NOT PROVIDED



BUSINESSOWNERS - ADDITIONAL POLICY DECLARATION

WS1452

INLAND MARINE COVERAGE PART

EFFECTIVE 8/15/14  
POLICY NO. BPO06086

NAME ALLPHIN CONSTRUCTION

8/16/14

ITEM	DESCRIPTION	SERIAL NO.	COVERED CAUSES OF LOSS	DED.	LIMIT OF INSURANCE	ANNUAL PREMIUM	MORT. NO.
01	TRUCK CARGO 07 OWNER GOODS	MIRAG TRLER 29926 CLASS 2	1	500	10,000	85.00	
02	TRUCK CARGO 01 OWNER GOODS	UNEX TRLER 51994 CLASS 2	1	500	10,000	85.00	
01	CONTRACTORS MOBILE EQUIPMENT SERIAL NO. ANMN11480 BOBCAT S590		2	500	46,000	552.00	9846

COVERED CAUSES OF LOSS  
1 = STANDARD FORM  
2 = SPECIAL FORM

\*\*\* TOTAL

722.00 \*\*\*

09846  
SUNLIGHT FEDERAL CREDIT UNION  
1601 S PARK DR  
PO BOX 190  
CODY WY 82414-0190

FO-10.117 (04/94)



1938 SHERIDAN AVE  
CODY,WY 82414  
307-587-2202 Phone  
307-527-6038 Fax  
CODY.WY@PROBUILD.COM

**PRCBuild**

---

2/3/15

To whom it may concern,

Darin Allphin construction LLC has had a charge account with Probuild since 2002. In the past years of knowing Darin and working closely with him on projects I would very highly recommend Darin. He is a man of his word and will get the job done professionally and in a timely manner. Darin is a very professional and honest business man and will go the extra mile so that all parties involved are treated equal. He is a great account and has always been current with us. If you have any questions please feel free to call me.

Thank You,

Rod Schutzman GM  
Probuild Cody, Wy

# Cody Seamless Siding

2326 Sheridan Ave. Cody, WY 82414 – (307) 587-7433 – Fax – (307)587-1277

02/06/2015

**TO WHOM IT MAY CONCERN:**

**IT IS MY PLEASURE TO KNOW DARIN ALLPHIN, AND I WHOLEHEARTEDLY  
VOUCH FOR HIS PERSONAL CHARACTER.**

**I HAVE KNOWN AND WORKED WITH DARIN FOR YEARS AND HAVE ALWAYS  
RESPECTED HIM AND FOUND HIM TO BE A VERY HONEST AND KNOWLEDGABLE  
IN THE CONSTRUCTION INDUSTRY.**



---

**GREG POLEY**

Feb. 4, 2015

Darin Allphin

To whom it may concern:

I have had the opportunity of being associated with Darin Allphin professionally for over twenty years. He is well versed in all phases of General Construction. With expertise in most. He is forthright, industrious and accommodating. Is highly qualified to take on any project, large or small.

I would highly recommend him for any project. If you need further information please feel free to contact me.

Respectfully  
Mark w. Allphin

Greg & Lucinda Greer  
222 West Cooper Lane  
Cody, Wyoming 82414

February 4, 2015

Re: Allphin Construction  
Darin Allphin

Gentlemen:

We have recently used Darin Allphin as a contractor for an addition and remodel on our home and have been exceptionally pleased with the quality of workmanship, and the quality of employees he uses. Darin has been professional and communicated well with us on any issues during the building process. He has proven to be very knowledgeable in regards to the construction and willing to offer suggestions when needed for changes. We would willing recommend him to others.

Sincerely,

A handwritten signature in blue ink, appearing to read "Greg Greer", with a long horizontal flourish underneath.

Greg Greer

Application Fee: \$50.00

License Fee: \$100.00

CITY OF CODY  
Contractors' License Prequalification Statement

Business Name: Ben Middleton Construction Date: 1/22/15

DBA: \_\_\_\_\_  Corporation  Partnership  Sole Proprietor

Location: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address: 640 Hwy. 114 City: Powell State: WY Zip: 82435

Phone: \_\_\_\_\_ Cell: (307) 272-1283 Fax: \_\_\_\_\_

E-mail: bn\_middleton@yahoo.com

License: Class A General Contractor, Category 1 or Category 2 / Class B / Class C

Specific Area of Work: Class C Framer

Which of the following do you have and maintain sufficiently to comply with all Federal, State and Local laws?

State Sales Tax ID: Yes: \_\_\_\_\_ No: X Number: \_\_\_\_\_

Federal ID: Yes: X No: \_\_\_\_\_ Number: 20-8952611

State ID: Yes: \_\_\_\_\_ No: X Number: \_\_\_\_\_

Workmen's Compensation: Yes: X No: \_\_\_\_\_ Number: 003766130

Public Liability and Property Damage: Company: Farm Bureau

Expiration Date: 6/7/15 Number: 9001212

Name of Principals (Including Positions and Local Representatives)

Name: Ben Middleton Position: owner Email: bn\_middleton@yahoo.com Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: (307) 272-1283

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Have you previously applied for a license in Cody? \_\_\_\_\_ When? \_\_\_\_\_

Good Until: \_\_\_\_\_

How long has your organization been in business? 15 years

Under this name? yes Other names? \_\_\_\_\_

List experience and/or qualifications which may apply to the license application: \_\_\_\_\_

38 years framing experience - also experience in concrete, siding, interior trimming

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever filed bankruptcy or failed on any financial obligations? No

If so, give specifics: \_\_\_\_\_

Have you or other principals failed to complete any work awarded to you? No

If so, where, when and why? \_\_\_\_\_

Are you familiar with the codes and regulations in Cody concerning your work areas? Yes

Name and address of Master License where applicable: \_\_\_\_\_

The above are true and accurate to the best of my knowledge and belief. References may be verified. I am aware that any false statements shall void this application.

Name of Organization

Ben Middleton Construction

By: \_\_\_\_\_

*[Handwritten signature]*

State of Wyoming

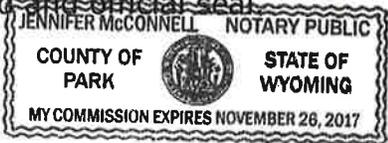
SS

County of Park

The foregoing instrument was acknowledged before me by Ben Middleton

this 10 day of February, 2015.

Witness my hand and official seal.



*[Handwritten signature: Jennifer McConnell]*  
Notary Public

My commission expires Nov 26, 2017.

Chairman of the Board \_\_\_\_\_ Approve \_\_\_\_\_ Deny \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## COMPANY PROJECT HISTORY

Please provide a list of specific projects.

Project Name	Owners Name	Address	Phone	Scope	Time Frame
Grandalen home	Rick Grandalen	Cowley		framing /finish	9/14 to present
Wyo-Ben office addition	Wyo-Ben	Greybull		framing /finish	7/14 to 11/14
Foulger home	Brent Foulger	Powell		framing /finish	10/13 to 8/14
4-unit town-house rental	Pryor Properties	Cowley		framing /finish	6/13 to 4/14
Gilliatt home	David Gilliatt	Powell		framing /finish	5/13 to 2/14
Gilmore home	Mike Gilmore	Powell		framing /finish	3/13 to 10/13
Anderson home	Keefe Anderson	Burlington		framing /finish	11/12 to 8/13
duplex	John Bennion	Cowley		framing /finish	10/12 to 6/13
Bridges home	Joe Bridges	Powell		framing /finish	4/12 to 11/12
Moss home	Mathew Moss	Cody		finish work	11/12 to 11/13
Hopkin home	Burchell Hopkin	Powell		framing /finish	9/11 to 5/12
Bennion home	John Bennion	Cowley		framing /finish	9/11 to 7/12
Caslick home	Jim Caslick	Powell		framing /finish	9/10 to 4/11
Duplex	Lloyd Snyder & Diane Hefeneider	Powell		framing /finish	9/10 to 7/11

If you need additional space, please attach a separate page.



TO: City of Cody, Wyoming  
RE: Ben Middleton, Middleton Construction

February 9, 2015

To Whom It May Concern:

I am happy to write this letter of recommendation for Ben Middleton, of Middleton Construction. I have utilized Ben's construction company since 1983 for various construction projects and sub-work.

Ben is a very capable, hard-working, honest and responsible person. He has demonstrated an ability to complete every job accepted in a timely manner with good workmanship. Ben has done foundation work, rough-framing, roof and truss work, installed windows, insulation, drywall, texture-paint, interior trim, doors, and all aspects of finish work for residential construction over the past 32 years I've known him.

I have absolutely no reservations in recommending Ben Middleton for whatever it is he is pursuing.

If you have any questions or need any further recommendation, please call me at 307-254-2109.

Respectfully Submitted,



Brad W. Cummings, General Contractor  
Cummings Construction, Inc.  
1133 Lane 7  
Powell, WY 82435

Erik Petersen Construction Inc.

1455 E Jefferson St

Powell, Wy 82435

(307) 202-0056

To whom it may concern,

Ben Middleton has been framing and trimming houses for me since 2005. I have always been happy with his work. He is a very conscientious builder and a great guy to work with. He gets along with people very well, and always follows through on agreements he has made.

Sincerely,

Erik Petersen

A handwritten signature in blue ink, appearing to read "Erik Petersen", is written below the typed name.



Your ECONOMICALLY  
CONVENIENT



BUILDING CENTER

# BLOEDORN LUMBER-POWELL

1075 West Coulter Ave

Powell, WY 82435

Phone 307-754-8180

Fax 307-754-8190

---

---

A Bloedorn Building Center

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To Whom It May Concern:

It is with pleasure that I write this letter of recommendation for Ben Middleton. I have been acquainted with Ben for 10 years and have found him to be a very skilled craftsman who seems to have a genuine concern for doing things to the best of his abilities, while keeping his everyone's best interests in mind. On many occasion I have worked closely with Ben on his projects and he seem to have a definite level of confidence in his work which is well deserved.

In a professional sense Ben has always conducted himself and his business affairs very well. It is a privilege to have an individual like Ben as one of my customers. He seems to use honesty as a rule of thumb, which is a quality that we would like to see more of in any profession. Ben not only has a grasp on his skills as a builder but a definite grip on his business as well, a sometimes rare yet demanded combination of traits if you are to succeed in any industry.

Jeff Martindale,  
Manager Bloedorn Lumber

..... January 22, 2015



January 22, 2015

To Whom It May Concern:

I am pleased to have been asked by Ben Middleton to write him a letter of recommendation.

Ben worked as a carpenter for me from 1985 until 2001. During that time he did both framing and finish work on my jobs. As the years went by, I continually gave him more responsibility and he always stepped up to the challenge. By the time he quit in 2001, he was my lead man and he was turning out top-notch work for me.

In 2001 Ben went into business for himself by starting Middleton Construction. Over the past 14 years I have used Ben and his crew to do almost all of my framing and finish projects. He is very particular with his workmanship. I have found Ben to be skilled in his trade, reliable, and honest. I continue to depend upon Ben and his crew as I move forward in my business.

It is without hesitation that I give him a high recommendation for the work that he does.

Best regards,

Daniel B. Bennion  
President



BUSINESS SQUIRE ADDITIONAL POLICY DECLARATION  
 COMMERCIAL GENERAL LIABILITY COVERAGE PART

WS1532

EFFECTIVE 6/09/14  
 POLICY NO. 90012112 NAME MIDDLETON BEN 12/31/14

LIMITS OF INSURANCE

GENERAL AGGREGATE LIMIT (OTHER THAN PRODUCTS/COMPLETED OPERATIONS)	2,000,000
PRODUCTS/COMPLETED OPERATIONS AGGREGATE LIMIT	2,000,000
PERSONAL AND ADVERTISING INJURY LIMIT	1,000,000
EACH OCCURRENCE LIMIT	1,000,000
DAMAGE TO PREMISES RENTED TO YOU LIMIT	50,000
MEDICAL EXPENSE LIMIT PER PERSON	5,000
LIABILITY DEDUCTIBLES PER OCCURRENCE BODILY INJURY	*NONE*
LIABILITY DEDUCTIBLES PER OCCURRENCE PROPERTY DAMAGE	500

THE FOLLOWING DISCLOSES ALL INSURED OPERATIONS KNOWN TO EXIST AT THE EFFECTIVE DATE OF THIS POLICY. ANY UNDECLARED OPERATIONS ARE NOT COVERED.

LOC. NO.	BLD. NO.	TYPE/DESCRIPTION	ANNUAL PREMIUM	MORTG
01		ENDORSEMENT CG 04 19(11/85) NON OWNED AUTO	58.00	
TOTAL PREMIUM			679.00	

F0-10.115 (04/88)

TYPE CODE  
 4-PREMISES/OPERATIONS  
 7-PRODUCTS/COMPLETED OPERATIONS

Application Fee: \$50.00

License Fee: \$100.00

CITY OF CODY  
Contractors' License Prequalification Statement

Business Name: Monarch Limited LLC Date: 1/12/15

DBA: \_\_\_\_\_  Corporation  Partnership  Sole Proprietor

Location: 1000 Hwy 91 S City: Dillon State: MT Zip: 59725

Mailing Address: PO Box 1381 City: Dillon State: MT Zip: 59725

Phone: (406) 925-2228 Cell: \_\_\_\_\_ Fax: (406) 683-3444

E-mail: monarch-ltd@hotmail.com

License: Class A General Contractor, Category 1 or Category 2 / Class B / Class C

CLASS A  
CAT 1A

Specific Area of Work: Commercial construction project in Cody

Which of the following do you have and maintain sufficiently to comply with all Federal, State and Local laws?

State Sales Tax ID: Yes: \_\_\_\_\_ No: \_\_\_\_\_ Number: \_\_\_\_\_

Federal ID: Yes: X No: \_\_\_\_\_ Number: 204293588

State ID: Yes: \_\_\_\_\_ No: \_\_\_\_\_ Number: \_\_\_\_\_

Workmen's Compensation: Yes: X No: \_\_\_\_\_ Number: 03-318098-5

Public Liability and Property Damage: Company: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Number: \_\_\_\_\_

Name of Principals (Including Positions and Local Representatives)

Name: Kevin Button Position: Owner Email: monarch-ltd@hotmail.com Phone: (406) 925-2228

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Have you previously applied for a license in Cody? No When? \_\_\_\_\_

Good Until: \_\_\_\_\_

How long has your organization been in business? Since: 02/28/2006

Under this name? Yes Other names? No

List experience and/or qualifications which may apply to the license application: \_\_\_\_\_

MBA, RAV, Cirencester, United Kingdom

BS, USU, Logan, Utah

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever filed bankruptcy or failed on any financial obligations? No

If so, give specifics: \_\_\_\_\_

Have you or other principals failed to complete any work awarded to you? No

If so, where, when and why? \_\_\_\_\_

Are you familiar with the codes and regulations in Cody concerning your work areas? Yes

Name and address of Master License where applicable: \_\_\_\_\_

The above are true and accurate to the best of my knowledge and belief. References may be verified. I am aware that any false statements shall void this application.

Name of Organization  
Monarch Ltd

By: [Signature]

State of Montana

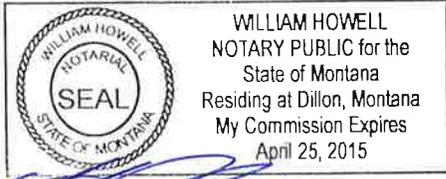
SS

County of Beaverhead

The foregoing instrument was acknowledged before me by Kevin Button Managing Member of Monarch Limited

this 20 day of January, 2015.

Witness my hand and official seal.



[Signature]  
Notary Public

My commission expires 4/25/15.

Chairman of the Board \_\_\_\_\_ Approve \_\_\_\_\_ Deny \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**COMPANY PROJECT HISTORY**

Please provide a list of specific projects.

Project Name	Owners Name	Address	Phone	Scope	Time Frame
Assisted Living	The Legacy Assisted Living	Dillon, MT	(406)6836867	Constructed 2, 10 bed assisted livings	First 1 in 2010 Second in 2014
Commercial Building	The Busines Depot	Dillon MT	(406)683-2234	Built 6 commercial rentals - Title Company, Accountant Office, Real Estate Office, Physical Therapy Clinic, Insurance office	2009-Current
Ortho Building	Moss Leasing LLC	Powell WY	(307)	Ortho Office / Rental Unit	Current

If you need additional space, please attach a separate page.



International Code Council  
900 Montclair Road  
Birmingham, AL 35213  
Toll-free (888) 422-7233 ext. 5524  
Fax (205) 599-9897



**To:** KEVIN C BUTTON  
155 Lincoln Drive  
Dillon, MT 59725  
USA

**From:** Certification and Testing Department

**Date:** 11/26/2014

**Subject:** 08/14/2014 Administration

**Examination:** Wyoming (WAM) General Building Contractor (A) Administration

**Result:** Pass Administration

Congratulations! You have passed the above-named examination.

It is extremely important that you notify Pearson VUE and ICC of any changes in name and/or address to avoid the possibility of future correspondence not being received. Please contact both Pearson VUE at 877-234-6082 and ICC at 1-888-422-7233 ext. 5524 with changes to your name and address.

A passing score on this examination satisfies the testing requirements only, and does not guarantee that licensing will be granted. You must also satisfy all local ordinance requirements prior to be considered for licensure.

ICC reserves the right to amend or withhold any examination scores if, in its sole opinion, there is adequate reason to question their validity.



**FARM BUREAU FINANCIAL SERVICES**

*Insurance • Investments*

P.O. Box 386, 221 E. Reeder St.  
Dillon, MT 59725  
406.683.6122 | 406.683.6123 fax  
800.735.7106 toll-free  
wlower@mwfb.com

**C. Wayne Lower, LUTCF**  
Agent

Registered Representative/  
Securities & services offered through  
FBL Marketing Services, LLC,\*  
5400 University Avenue,  
West Des Moines, IA 50266,  
877.860.2904, Member SIPC

January 16, 2015

To: City of Cody, Wyoming  
1338 Rumsey Avenue  
PO Box 1381  
Cody, Wyoming 82414

RE: Monarch Limited LLC  
Kevin Button & Chance Bernall  
PO Box 1381  
Dillon, MT 59725

Monarch Limited LLC has been a client with Mountain West Farm Bureau for 8 years. His current Commercial Liability limits are 1,000,000/2,000,000, Auto Liability limits are \$1,000,000. If you need something more please let us know.

Sincerely,

C. Wayne Lower, LUTCF  
Farm Bureau Financial Services



January 12, 2015

Re: Kevin Button  
SS# XXX-XX-0102

To Whom It May Concern:

Please be advised that Kevin Button has been a customer of Pioneer Federal Savings and Loan Association for over 8 years.

During this period of time, we have provided financing for Kevin individually as well as for his various enterprises. This financing includes for single and multifamily residences as well as for two assisted living facilities. At times, our involvement has included construction as well as long term financing.

Kevin has handled his business dealings with Pioneer Federal in a most satisfactory manner and is a borrower in good standing with us. In the appropriate situation, we would consider further business dealings with Kevin.

A handwritten signature in blue ink, appearing to read "Tom Welch", is positioned above the printed name.

Tom Welch  
President/CEO

32 North Washington Street • PO Box 1103 • Dillon, Montana 59725  
Telephone 406•683•5191 Fax 406• 683•6759  
[www.pioneerfed.com](http://www.pioneerfed.com)

*Equal Housing Lender • Member FDIC*



Dr. Mathew A. Moss DDS, MS  
1817 17<sup>th</sup> St.  
Cody, WY 82414  
(307) 5879009

January 12, 2015

Contractor's Board  
City of Cody  
1338 Rumsey Ave, PO Box 2200  
Cody, WY 82414

Dear Contractor's Board:

I am currently in the process of working with Monarch Limited, LLC to construct a 6,000 square foot commercial building in Powell, WY. I have known Kevin Button for over 18 years. While Kevin was going to college, he worked for my brother framing ranger housing in Yellowstone National Park during the summer. Prior to hiring Kevin's company for my Powell Building, I asked my brother of his opinion and he had nothing but good things to say, remembering certain instances of quality control from Kevin from over 15 years ago.

I have been considering building around the Cody area for the last few years. I have interviewed a number of contractors and after meeting with some of Monarch Limited's clients in Montana, I am confident in the companies' ability to provide me a well built building that I will be proud to own for many years to come.

In closing I have seen many buildings constructed by Monarch Limited LLC, and feel that his talents would be well appreciated in the City of Cody, if you have any questions please call.

Sincerely,

Dr. Mathew A. Moss DDS, MS  
Moss Leasing, LLC



PO Box 1151  
411 N Montana St  
Dillon, MT 59725  
P (406) 683-9020  
F (406) 683-9856

January 9, 2015

City of Cody Wyoming

To Whom It May Concern:

This letter is to serve as a recommendation for Mr. Kevin Button, dba Monarch Limited, LLC.

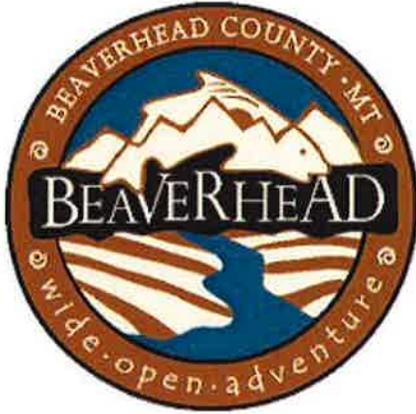
Mr. Button has engaged my services of monthly accounting and tax preparation for over ten years. My office pays the bills for Monarch Limited, LLC; therefore, I can attest that Monarch's vendors are always paid timely and his records are kept current.

Among several construction contractors I have for clients, Monarch Limited, LLC has one of the best reputations and is an asset to our community. I have moved my office to a building owned by Monarch, Limited, LLC, which has proven to be a great benefit for my business.

If you have any questions regarding Kevin Button or his business, please call me with any of your concerns.

Sincerely,

Susan McRae  
Certified Public Accountant



**Beaverhead County Planning Department  
2 South Pacific St., Ste. #7  
Dillon, MT 59725-4000**

**Phone: (406)683-3765 Fax: (406)683-3769**

*Rick Hartz*

*Land Use & Planning Coordinator*

*[rhartz@beaverheadcounty.org](mailto:rhartz@beaverheadcounty.org)*

January 15, 2015

City of Cody Contactor's Board  
PO Box 2200  
Cody, WY 82414

To Whom It May Concern:

As the County Planner in Beaverhead County; I have had the opportunity to work with Kevin Button on two of his projects here in our county.

In 2012, Mr. Button submitted a proposal for a thirteen lot major subdivision. Our office was responsible for reviewing and placing conditions of final plat approval for compliance with Montana's Subdivision Regulations as well as a variety of other associated state and federal laws and regulations. Mr. Button completed all of the conditions of approval that Beaverhead County had placed on this proposal and was granted final plat approval on June 1, 2012. Some of the regulatory issues that he successfully completed included a 404 authorization from the US Army Corps of Engineers, a 318 permit from the Montana Department of Fish, Wildlife, and Parks, a storm water discharge permit associated with construction activity authorization from the Montana Department of Environmental Quality, a 310 permit from the County Conservation District for work adjacent to a stream as well as review and approval from the Montana Department Environmental Quality for drinking water, sanitation, and storm water runoff associated with these thirteen residential lots. In addition; two bridges that were constructed as well as the subdivision road were designed and constructed to our County standards, and certified as such by the project engineer as such prior to final plat approval.

In October of 2013 Mr. Button (d.b.a. The Legacy Assisted Living, LLC) constructed a 6,200 sq. ft., 10-bed, category A, assisted living facility that our office reviewed for compliance with the Beaverhead County Buildings for Rent or Lease Regulations. This facility was an expansion of an existing separate 10-bed category A assisted living facility that Mr. Button constructed and opened in 2010.

This facility required Mr. Button to comply with and construct this facility in accordance with the rules and regulations of the Montana Department of Public Health and Human Services for an assisted living facility license, as well as the State of Montana Building Codes Bureau building permit. The county review process involved such issues as adequate ingress/egress, water and wastewater facilities, impact on the physical environment and emergency medical and fire protection services, etc.

Mr. Button, d.b.a. Legacy Assisted Living LLC completed the conditions of approval that were placed on his application upon final inspection on November 26, 2013.

Beaverhead County does not have a building permit or inspection ordinance or regulation, and I am not a buildings permit inspector and cannot speak to actual construction related issues. In my experiences with Mr. Button, he has demonstrated the ability to successfully take a project thru the maze of local, state, and federal rules and regulations. By his compliance with these rules and regulations; Mr. Button did everything the Beaverhead County Planning Department required him to do.

I would consider both of the above mentioned projects to be successful. The assisted living facility consistently runs at full capacity with a waiting list, and the 13-lot subdivision has had eight new homes constructed on this property since 2012.

Sincerely,

A handwritten signature in black ink that reads "Rick Hartz". The signature is written in a cursive, slightly slanted style.

Rick Hartz, Planner  
Beaverhead County

Application Fee: \$50.00

License Fee: \$100.00

CITY OF CODY  
Contractors' License Prequalification Statement

Business Name: Bryan Landon Construction Date: 2-3-15

DBA: \_\_\_\_\_  Corporation  Partnership  Sole Proprietor

Location: 2161 N. Deborah Dr. Ste 200 City: Idaho Falls State: ID Zip: 83401

Mailing Address: PO Box 36 City: Llcon State: ID Zip: 83454

Phone: 208.524.0895 Cell: 208.521-1477 Fax: 208.524-4097

E-mail: landon0895@a.com

License: Class A General Contractor, Category 1 or Category 2 / Class B Class C

Specific Area of Work: Concrete

Which of the following do you have and maintain sufficiently to comply with all Federal, State and Local laws?

State Sales Tax ID: Yes:  No: \_\_\_\_\_ Number: 004400770 - Idaho

Federal ID: Yes:  No: \_\_\_\_\_ Number: 71 0887370

State ID: Yes:  No: \_\_\_\_\_ Number: RCE-6577 - Idaho

Workmen's Compensation: Yes:  No: \_\_\_\_\_ Number: 582490 - Idaho

Public Liability and Property Damage: Company: The Buckner Company (Accord)

Expiration Date: 4-15 Number: BKS 54739703

Name of Principals (Including Positions and Local Representatives)

Name: Bryan Landon Position: Owner Email: landon0895@a.com Phone: 208.524.0895

Name: Mandy Landon Position: Owner Email: landon0895@a.com Phone: 208.524.0895

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Have you previously applied for a license in Cody? No When? \_\_\_\_\_

Good Until: \_\_\_\_\_

How long has your organization been in business? Since 2002

Under this name? Yes Other names? \_\_\_\_\_

List experience and/or qualifications which may apply to the license application: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever filed bankruptcy or failed on any financial obligations? No

If so, give specifics: \_\_\_\_\_

Have you or other principals failed to complete any work awarded to you? No

If so, where, when and why? \_\_\_\_\_

Are you familiar with the codes and regulations in Cody concerning your work areas? Yes

Name and address of Master License where applicable: Idaho RCE-6577

The above are true and accurate to the best of my knowledge and belief. References may be verified. I am aware that any false statements shall void this application.

Name of Organization

Bryan Landon Construction, Inc.

By: Mandy Yandon Secretary

SS



State of Idaho  
City of Pringleville

The foregoing instrument was acknowledged before me by Mandy Landon

this 3<sup>rd</sup> day of February, 2015.

Witness my hand and official seal.

Stefanie L. Streper  
Notary Public

My commission expires 2/21/2020.

Chairman of the Board \_\_\_\_\_ Approve \_\_\_\_\_ Deny \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**COMPANY PROJECT HISTORY**

Please provide a list of specific projects.

Project Name	Owners Name	Address	Phone	Scope	Time Frame
Golden Valley Natural	Maurer Construction	2621 Connery Way Missoula, MT 59808	406-542-6565		May 2014 to present
Camper World	CCI Construction	941 E. Winding Creek Ste. 117, Eagle, ID 83616	208-287-6401		November 2014 to present
5 Fed-Ex Buildings	SE/z Construction	705 John Adams Idaho Falls, ID 83401	208-528-9449		Past and present
Mountain Lofts Apartments	Headwaters Construction	639 W. 9500 S. #1 Victor, ID 83455	208-313-7100		May, 2013 to Dec. 2013
Carriage Cove Idahoan	OKland Construction Steel Vision Attn: Ashley Moncur	1978 S. West Temple Salt Lake, UT 84115 648 N. 4116 E. Rioby, ID 83442	801-486-0144 208-745-1105		Oct. 2013 to April 2014
Klim	"	"	"		Current
Volm Bag	"	"	"		
Panda Express	"	"	"		
Hundreds of Agricultural and Commercial Buildings	"	"	"		Current
BYU-I Conference Ctr.	OKland Construction	1978 S. West Temple Salt Lake, UT 84115	801-486-0144		
Smith Chevrolet, Honda Detail Ctr.	Bateman Hall	1405 Footc Dr. Idaho Falls, ID 83402	(Doil Clements) 208-221-7487		Nov. 2013 to April 2014
Walgreens	" "	"	"		Jan. 2014 to current
Frasure Industrial	" "	"	"		

If you need additional space, please attach a separate page.





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
2/3/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> The Buckner Company 960 Pier View Drive Suite A Idaho Falls ID 83402	<b>CONTACT NAME:</b> Lisa Thorne <b>PHONE (A/C, No, Ext):</b> 208-656-7934 <b>E-MAIL ADDRESS:</b> lthorne@buckner.com	<b>FAX (A/C, No):</b> 801-365-0865
	<b>INSURER(B) AFFORDING COVERAGE</b>	
<b>INSURED</b> Bryan Landon Construction, Inc. P O Box 36 Ucon ID 83454	<b>INSURER A :</b> Ohio Security Insurance Company	<b>NAIC #</b> 24082
	<b>INSURER B :</b> Ohio Casualty Insurance Company	<b>NAIC #</b> 24074
	<b>INSURER c :</b> Idaho State Insurance Fund	<b>NAIC #</b> 36129
	<b>INSURER D :</b>	
	<b>INSURER E :</b>	

**COVERAGES** **CERTIFICATE NUMBER:** 1783999487 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			BKS54739703	4/12/2014	4/12/2015	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 MED EXP (Any one person) \$15,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
A	<input checked="" type="checkbox"/> <b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			BAS54739703	4/12/2014	4/12/2015	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$10,000			USO55565590	4/12/2014	4/12/2015	EACH OCCURRENCE \$1,000,000 AGGREGATE \$1,000,000 \$
C	<input checked="" type="checkbox"/> <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N <input type="checkbox"/> N/A	582490	4/1/2014	4/1/2015	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$100,000 E.L. DISEASE - EA EMPLOYEE \$100,000 E.L. DISEASE - POLICY LIMIT \$500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

<b>CERTIFICATE HOLDER</b>  City of Cody 1338 Rumsey Avenue Cody WY 82414	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE 
--	--

**Bureau of Occupational Licenses  
Department of Self Governing Agencies**

The person named has met the requirements for registration and is  
entitled under the laws and rules of the State of Idaho to operate as a(n)

**REGISTERED ENTITY CONTRACTOR**

**BRYAN LANDON CONSTRUCTION INC  
BRYAN LANDON  
10260 N YELLOWSTONE HWY  
IDAHO FALLS ID 83401**

*Tana Cory*  
**Tana Cory  
Chief, B.O.L.**

**RCE-6577  
Number**

**01/10/2016  
Expires**

C.L. "Butch" Otter  
Governor

**State of Idaho**  
**Division of Building Safety**  
**PUBLIC WORKS CONTRACTORS LICENSING BUREAU**  
**CONTRACTOR**

PWC-C-16498 - AA - 4  
License Number

04/10/2006  
Original License Issued

Categories: 03200, 03370

This is to certify that  
**BRYAN LANDON CONSTRUCTION, INC.**

has fulfilled the requirements of the law relating to licensing in Idaho Code, Title 54, Chapter 19 & 45  
and is hereby granted this certificate.

This license expires: 06/30/2015

Mandy Landon  
Licensee Signature

C. Kelly Pearce  
C. Kelly Pearce, Administrator

To: Scott King, City of Cody

From: Stefanie with Bryan Landon Construction

Fax Number: 307-527-6532

Date: February 3, 2015

Pages attached: 6

Hi Scott,

I have attached 6 pages for our application for licensing in the City of Cody for Bryan Landon Construction. Once this approved and processed, Ryan Murdoch our foreman, can provide you with credit card payment if you could contact him at 208-521-4463. If you need anything further, you can reach me at 208-521-5214. I have also sent this to your email.

Thank you so much for processing this.

Stefanie Streeper



1978 South West Temple  
Salt Lake City, UT 84115  
Phone 801.486.0144  
Fax 801.486.7570  
Web [www.okland.com](http://www.okland.com)

February 4, 2015

RE: Bryan Landon Construction - Madison Carriage Cove Short Stay Rehabilitation

To whom it may concern,

I am very pleased to write this letter of reference for Bryan Landon Construction, which provided site concrete for the Madison Carriage Cove Short Stay Rehabilitation building. The Madison Carriage Cove building represents a high end, high service medical treatment rehabilitation center serving the public of eastern Idaho. This project was a joint venture between Madison Memorial Hospital and Homestead Living. Bryan Landon provided a high quality product within a very tight schedule. Okland Construction would be very happy to work with Bryan Landon on future projects.

Sincerely,

**Zach Lewis**, leed ap | Project Manager

**OKLAND CONSTRUCTION**  
1978 S. West Temple | Salt Lake City, UT 84115

T 801.486.0144 C 801.870.1523

[Zach.Lewis@Okland.com](mailto:Zach.Lewis@Okland.com)

[www.okland.com](http://www.okland.com) | [www.okland.com](http://www.okland.com) | [www.okland.com](http://www.okland.com)



# SE/Z

## CONSTRUCTION, LLC

February 4, 2015

Scott King  
City of Cody  
P.O. Box 2200  
Cody, WY 82414

Re: Letter of Reference for Bryan Landon Construction, Inc.

Dear Mr. King,

Bryan Landon Construction has worked with us on multiple projects throughout the past seven years. Most recently they partnered with us on the Helena, MT and Rexburg, ID Fed Ex Ground facilities.

We appreciate their attention to detail and professionalism. Their work is excellent and their employees represent the firm very well.

Bryan Landon Construction maintains their equipment, implements safety precautions utilizing a skilled staff and quality products.

We highly value their company and look forward to teaming with them on future projects, as we know we can count on them to deliver a finished quality product every time.

Sincerely,

Steve Zambarano  
President

---

705 John Adams Parkway  
Phone: 208-528-9449

Idaho Falls, ID 83401  
Fax: 208-528-2316

Idaho Contractors License # RCE-1330  
[www.sezconstruction.com](http://www.sezconstruction.com)



February 4, 2015

City of Cody  
Scott King

I am writing regarding Bryan Landon Construction Inc. We have used Bryan Landon Construction to complete our concrete work on an average of 10 to 15 project a year since 2002.

Bryan Landon Construction has helped us maintain our project schedules and quality by utilizing the latest equipment in the industry. In the most recent years they have purchased Aluminum Footing panels, new Aluminum Wall Forms, and a riding laser Screed.

Given our experience from contracting and completing projects with Bryan Landon Construction, we are happy to recommend them as a concrete subcontractor for the city of Cody.

Sincerely,

A handwritten signature in cursive script that reads "AshLee Moncur".

AshLee Moncur  
Estimator

648 N. 4116 E. \* P.O. Box 21 \* Rigby, ID 83442 \* Office: (208) 745-1105  
Fax: (208) 745-1406 \* E-Mail: [info@steelvisionconstruction.com](mailto:info@steelvisionconstruction.com)  
State of Idaho Bureau of Occupational License #RCE-1389  
Public Works Contractors License #PWC-C-15755-AA-3



1405 Foote Drive, Idaho Falls, ID 83402  
P.O. Box 1464, Idaho Falls, ID 83403  
Office: 208-523-2681  
Fax: 208-524-4435  
[www.bateman-hall.com](http://www.bateman-hall.com)

---

February 4, 2015

City of Cody  
C/O Scott King  
PO Box 2200  
Cody, WY 82414

Dear Mr. King:

It is my pleasure to write a letter of recommendation for Bryan Landon Construction. Bryan Landon has been a subcontractor for Bateman-Hall, Inc. on many projects over the past several years. These projects range from small retail buildings to large commercial, public, and manufacturing buildings.

Recent projects they have been involved in include Walgreens #15973, The Smith Group Honda & Chevrolet Dealership, Les Schwab Alignment Center, and Frazier Building.

Bryan Landon's crew has consistently performed above expectations. I have no reservations about recommending them as a subcontractor on any size project.

Sincerely,

Doll Clements, Project Manager  
Bateman-Hall, Inc.

DC/jal

Application Fee: \$50.00

License Fee: \$100.00

CITY OF CODY  
Contractors' License Prequalification Statement

Business Name: E & L Const. Date: 1-14-2015

DBA: \_\_\_\_\_  Corporation  Partnership  Sole Proprietor

Location: 1525 Salisbury Ave City: Cody State: WY. Zip: 82414

Mailing Address: 110 Canterbury Rd City: Zwolle State: La. Zip: 71486

Phone: \_\_\_\_\_ Cell: 307-899-5251 Fax: \_\_\_\_\_

E-mail: Elsie.Porter@ymail.com

License: Class A General Contractor / Class B Electrical, Plumbing, HVAC / Class C Other

Specific Area of Work: Class A General Contractor

Which of the following do you have and maintain sufficiently to comply with all Federal, State and Local laws?

State Sales Tax ID: Yes: \_\_\_\_\_ No: X Number: \_\_\_\_\_

Federal ID: Yes: X No: \_\_\_\_\_ Number: ~~307~~-498-52-9811

State ID: Yes: \_\_\_\_\_ No: X Number: \_\_\_\_\_

Workmen's Compensation: Yes: \_\_\_\_\_ No: X Number: \_\_\_\_\_

Public Liability and Property Damage: Company: HBI Insurance Services Inc.

Expiration Date: \_\_\_\_\_ Number: To be Issued.

Name of Principals (Including Positions and Local Representatives): Porter@ymail.com

Name: Vencil Lee Porter Position: owner Email: Elsie Porter Phone: 307-899-5251

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Have you previously applied for a license in Cody? yes When? 1992

Good Until: 2013 December 31st

How long has your organization been in business? 45+ years

Under this name? E & L Const Other names? Porters Custom Bldg

List experience and/or qualifications which may apply to the license application: \_\_\_\_\_

Licensed in Cody 1992 Through 2013

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever filed bankruptcy or failed on any financial obligations? NO

If so, give specifics: \_\_\_\_\_

Have you or other principals failed to complete any work awarded to you? NO

If so, where, when and why? \_\_\_\_\_

Are you familiar with the codes and regulations in Cody concerning your work areas? yes

Name and address of Master License where applicable: \_\_\_\_\_

The above are true and accurate to the best of my knowledge and belief. References may be verified. I am aware that any false statements shall void this application.

Name of Organization

E & L Const

By: Vencil Lee Porter

Vencil Lee Porter SS 498-52-9811

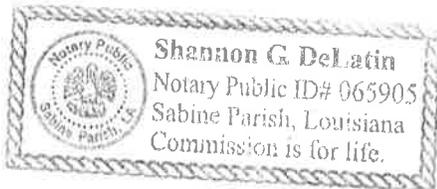
State of Louisiana

County of Sabine

The foregoing instrument was acknowledged before me by Vencil Lee Porter

this 15<sup>th</sup> day of January, 2015.

Witness my hand and official seal.



Shannon G. DeLatin

Notary Public

My commission expires \_\_\_\_\_

Chairman of the Board \_\_\_\_\_ Approve \_\_\_\_\_ Deny \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_





# Pinnacle Bank

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City of Cody Contractor's Board  
1338 Rumsey Avenue  
Cody, WY 82414

Re: E & L Construction / Lee Porter

Gentlemen:

Please consider this my letter of recommendation to reinstate the City of Cody contractor's license for Lee Porter d/b/a E & L Construction.

Over the past 20 years Mr. Porter has completed numerous construction jobs for myself personally and Pinnacle Bank. These jobs included a room and deck addition to a personal residence, complete remodel of a personal residence and addition of a semi-enclosed porch and deck. Mr. Porter also completed a complex remodel and office addition to the former Pinnacle Bank facility at 1702 17<sup>th</sup> Street.

All jobs were completed properly, in a timely fashion and on budget. The entire relationship from start to finish was very professional and the quality of work was excellent.

Should you require additional information feel free to contact me at anytime.

Sincerely,

Doug Weedin  
President  
Pinnacle Bank- Wyoming



MEMBER FDIC

Reference:

E&L Construction Letter of Recommendation for Contractor's License Reinstatement

I have known Lee Porter for about 20 years. I met him while I worked for UBC Lumber.

I ask him to build a spec home for me on the Southfork in Lakeview Subdivision in, I believe 1999. I worked along with him whenever my work schedule would allow.

He then built a home for my wife and I in 2003 on Kent Ave. We have lived in this home ever since and are very happy with the construction and would recommend him to others at any time.

  
Walter P. Nelson

3111 Kent Ave.

Cody, WY 82414

587-5225 or 899-5225

TO WHOM IT MAY CONCERN

I WOULD LIKE TO SUBMIT THIS LETTER OF RECOMMENDATION FOR LEE PORTER OF E&L CONSTRUCTION.

I HAVE HAD LEE DO MANY PROJECTS FOR ME OVER THE LAST ALMOST 20 YEARS.

HE ADDED ON TO MY HOUSE ON BLEISTEIN AVE TWICE IN THAT TIME. THE FIRST TIME WAS IN ABOUT 1996 WHEN HE EXTENDED THE WALL IN OUR MASTER BEDROOM AND ADDED A VERY LARGE DECK TO THE BACK OF THE HOUSE.

THE SECOND ADDITION WAS AROUND 2003 WHEN HE ADDED A DINING ROOM ON TO THE HOUSE. BOTH ADDITIONS AND ALL OTHER SMALL PROJECTS WERE DONE VERY WELL, ON TIME AND ON OR BELOW THE ORIGINAL ESTIMATE.

I WOULD AND HAVE RECOMMENDED HIM TO MANY OF MY FRIENDS AND ACQUAINTANCES.

PLEASE CONTACT ME AT 587-2338 OR 602-826-1525 IF YOU NEED ANY MORE INFORMATION.

SINCERELY,



DALE QUINN  
1244 BLEISTEIN AVE.  
CODY, WY 82414

Letter of Recommendation for E&L Construction

I have known Lee Porter for almost 20 years. I met him in 1996 while he was building a home on North St in Cody. I lived just down the street and watched the progress from the start and was impressed with his work so ask him to build a home for my mother on Madison Ave in 1998.

I have lived in the home myself now for several years and have never experienced any problems due to poor construction. I worked right along with him the entire time and was impressed with his skill and attention to detail.

Please let me know if you have any questions or need any more information.

A handwritten signature in blue ink that reads "Eugene Wilson". The signature is written in a cursive style and is positioned above a solid horizontal line.

Eugene Wilson

2413 Madison Ave.

Cody, WY 82414

587-2621

Application Fee: \$50.00

License Fee: \$100.00

CITY OF CODY  
Contractors' License Prequalification Statement

Business Name: MCG'S ROOFING LLC Date: \_\_\_\_\_

DBA: \_\_\_\_\_  Corporation  Partnership  Sole Proprietor

Location: \_\_\_\_\_ City: CODY State: WY Zip: 82414

Mailing Address: P.O. Box 292 City: CODY State: WY Zip: 82414

Phone: 406-860-0071 Cell: 307 891-1428 Fax: \_\_\_\_\_

E-mail: MCGS ROOFING@GMAIL.COM

License: Class A General Contractor, Category 1 or Category 2 / Class B / Class C

Specific Area of Work: ROOFING

Which of the following do you have and maintain sufficiently to comply with all Federal, State and Local laws?

State Sales Tax ID: Yes: \_\_\_\_\_ No: \_\_\_\_\_ Number: \_\_\_\_\_

Federal ID: Yes: \_\_\_\_\_ No: \_\_\_\_\_ Number: \_\_\_\_\_

State ID: Yes:  No: \_\_\_\_\_ Number: 47-3053600

Workmen's Compensation: Yes: \_\_\_\_\_ No:  Number: \_\_\_\_\_

Public Liability and Property Damage: Company: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Number: \_\_\_\_\_

Name of Principals (Including Positions and Local Representatives)

Name: BRIAN MCGONAGLE Position: OWNER/OPERATOR Email: MCGS ROOFING@GMAIL.COM Phone: 406-860-0071

Name: AMANDA MCGONAGLE Position: OWNER Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Have you previously applied for a license in Cody? NO When? \_\_\_\_\_

Good Until: \_\_\_\_\_

How long has your organization been in business? 2 WEEKS

Under this name? YES Other names? N/A

List experience and/or qualifications which may apply to the license application: \_\_\_\_\_

9 YEARS ROOFING BOTH METAL AND SHINGLES.

Have you ever filed bankruptcy or failed on any financial obligations? NO

If so, give specifics: \_\_\_\_\_

Have you or other principals failed to complete any work awarded to you? NO

If so, where, when and why? \_\_\_\_\_

Are you familiar with the codes and regulations in Cody concerning your work areas? YES

Name and address of Master License where applicable: \_\_\_\_\_

The above are true and accurate to the best of my knowledge and belief. References may be verified. I am aware that any false statements shall void this application.

Name of Organization

MCS ROOFING LLC

By: [Signature]

State of Wyoming

SS

County of Park

The foregoing instrument was acknowledged before me by Brian S. McGonagle

this 19<sup>th</sup> day of February, 2015.

Witness my hand and official seal.



[Signature]  
Notary Public

My commission expires 11/05/2017.

Chairman of the Board \_\_\_\_\_ Approve \_\_\_\_\_ Deny \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



January 29, 2015

To Whom It May Concern:

Re: Brian McGonagle

Please consider this a letter of recommendation on behalf of Brian McGonagle with McG's Roofing. I've had the pleasure of having Brian work on Jerry Thiel & Sons Construction jobs for the past two years. In that time, he has demonstrated professional skills and ethical qualities that I feel make him more than qualified to be a licensed roofing contractor.

Brian has strived to be accommodating and prompt in his services with our company. In addition, he is very consistent on delivering quality workmanship; paying extra attention to details. I feel that he would be a great addition to the roofing contractors list and I would highly recommend that Brian be approved for that license.

If I can be of further assistance, please do not hesitate to contact me. Thank You.

Sincerely,

A handwritten signature in black ink, appearing to read "Kip B. Thiel", written over a diagonal line.

Kip B. Thiel  
Kip B. Thiel Construction, Inc.  
307-250-3743

# **Atnip Construction LLC**

**39 Road 6-SS**

**Cody, WY 82414**

**Ph./Fax 307-587-4988**

**E mail [jim@atnipconstruction.com](mailto:jim@atnipconstruction.com)**

1-30-2015

To whomever this concerns.

Brian McGonagle has been installing roofing for me for the last nine years. He has done a great job with the quality of workmanship and final finish looks great. He runs his crew with the same quality of workmanship that he does himself and take the responsibility to see that they do it correct. I would recommend him to anyone that wants their roof to be done by him.

Jim Atnip

Atnip Construction LLC

39 Road 6SS

Cody, WY 82414

P/F----307-587-4988

C-----307-899-4988

[jim@atnipconstruction.com](mailto:jim@atnipconstruction.com)

The Log Guys  
Dale Sims  
4 Arabian Lane  
Cody WY 82414  
307-899-0470

To Whom it may concern:

I have known Brian for about ten years. He was working for a roofing company and I was the foreman for a log home contractor when we met. I saw that Brian was not afraid to work hard and was detailed in his work.

I am now self-employed , building log furniture. My wife and I had an addition added on to our own home. Brian is who I called to put the roof on. He did a very good job. Efficient, works at a very good pace and keeps his work area cleaned and organized. He also put a deck on our house.

Brian is dependable and easy to get along with. If you have any questions you are welcome to call me anytime.

Sincerely

Dale Sims

To Whom It May Concern:

I strongly recommend my colleague, Brian McGonagle. I have had the pleasure of working alongside him for 9 years in the Roofing industry, where he has been entrusted with a great deal of responsibility.

I have had the opportunity to observe Brian's professional skills as well as interpersonal style. He is consistently pleasant, and takes on all jobs with enthusiasm and dedication.

Regardless of deadlines or other pressure, Brian always finishes his jobs neatly and with integrity. His character equates to jobs finished without any quality being compromised.

In the 12 years I have worked in the Roofing industry, I have worked with many Roofers. I place Brian at the very top of the list of Roofers I have seen or worked with.

Sincerely,

A handwritten signature in cursive script, appearing to read "Wesley Brantz". The signature is written in dark ink and has a long, sweeping horizontal stroke extending to the right.

Wesley Brantz

Application Fee: \$50.00

License Fee: \$100.00

CITY OF CODY  
Contractors' License Prequalification Statement

Business Name: First Stage Renovations Date: 2/16/2015

DBA: \_\_\_\_\_  Corporation  Partnership  Sole Proprietor

Location: 10211 Beach St Unit B City: Denver State: CO Zip: 80221

Mailing Address: PO Box 16752 City: Denver State: CO Zip: 80216

Phone: 303-346-5617 Cell: 303-210-3992 Fax: 303-683-6018

E-mail: firstalliance@guestoffice.net

License: Class A General Contractor, Category 1 or Category 2 / Class B / Class C

Specific Area of Work: Interior Commercial Demolition

Which of the following do you have and maintain sufficiently to comply with all Federal, State and Local laws?

State Sales Tax ID: Yes: \_\_\_\_\_ No: X Number: LABOR ONLY

Federal ID: Yes: X No: \_\_\_\_\_ Number: 02-0715350

State ID: Colorado Yes: X No: \_\_\_\_\_ Number: 03502924

Workmen's Compensation: Yes: X No: \_\_\_\_\_ Number: 4078408

Public Liability and Property Damage: Company: Nestfield Insurance

Expiration Date: 4/10/2015 Number: TR40352710

Name of Principals (Including Positions and Local Representatives)

Name: Eric Mathias Position: President Email: Some as above Phone: 303-210-2440

Name: Aaron Romero Position: Vice President Email: Some as above Phone: 303-210-3992

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Have you previously applied for a license in Cody? No When? \_\_\_\_\_

Good Until: \_\_\_\_\_

How long has your organization been in business? 2003

Under this name? \_\_\_\_\_ Other names? \_\_\_\_\_

List experience and/or qualifications which may apply to the license application: We are a commercial interior demolition subcontractor established in 2003. The owners both have 15+ years experience in the commercial construction field and have performed thousands of projects ranging from big to small, hospitals, schools, tenant finish projects, government projects, and more. We pride our selves in quality work & performance.

Have you ever filed bankruptcy or failed on any financial obligations? No

If so, give specifics: \_\_\_\_\_

Have you or other principals failed to complete any work awarded to you? No

If so, where, when and why? \_\_\_\_\_

Are you familiar with the codes and regulations in Cody concerning your work areas? Yes

Name and address of Master License where applicable: N/A

The above are true and accurate to the best of my knowledge and belief. References may be verified. I am aware that any false statements shall void this application.

Name of Organization

First Stage Renovations

By: \_\_\_\_\_

State of Colorado

SS

County of Adams

The foregoing instrument was acknowledged before me by Aaron Romero

this 14th day of February, 2015.

Witness my hand and official seal.



[Signature]  
Notary Public

My commission expires Aug 3, 2014.

My Commission Expires 08/03/2016

Chairman of the Board \_\_\_\_\_ Approve \_\_\_\_\_ Deny \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## COMPANY PROJECT HISTORY

Please provide a list of specific projects.

Project Name	Owners Name	Address	Phone	Scope	Time Frame
Colorado Center for the Blind	Maxwell Builders, Inc.	2233 W. Shepard Avenue, Denver, CO	303-762-1812	Interior Demolition	2014
Colorado Comprehensive Spine Institute	A.D. Miller Services Inc.	3277 S. Lincoln Street, Denver, CO	303-221-7770	Interior Demolition	2014
Greeley Hospital	Layton Construction Co., Inc.	1801 16th Street, Greeley, CO	801- 316-6062	Interior Demolition	2014
Rose Medical Center	A.D. Miller Services Inc.	4567 E. 9th Avenue, Denver	303-221-7770	Interior Demolition	2014
Kidney Center	Maxwell Builder's, Inc.	Parker, CO	303-762-1812	Interior Demolition	2013
Denver Vision Center	DC General Services, Inc.	2460 W. 26th Avenue, Denver, CO	303-355-7056	Interior Demolition	2013
Hearing Rehab	Jordy Construction	6851 S. Holly Circle, Denver, CO	303-744-6106	Interior Demolition	2013
Kaiser Restrooms	DRG Construction Corp.	10350 E. Dakota Avenue, Denver, CO	303-274-7716	Interior Demolition	2013
Mental Health Restrooms	A&B Builders	4851 Independence, Denver, CO	303-778-8555	Interior Demolition	2012
Clinic	Faurot Construction	8990 North Washington, Thornton, CO	303-642-7212	Interior Demolition	2012
Colorado Cancer Research Program	Tenant Improvement Construction Corp.	1720 S. Bellaire Street, Denver, CO	720-475-1247	Interior Demolition	2012
Colorado Health & Hospital Association	HITT Contracting Inc.	7335 E. Orchard Rd., Greenwood Village, CO	720-399-1370	Interior Demolition	2012

If you need additional space, please attached a separate page.



Eric Mathias

**PERSONAL WORK HISTORY**

Please provide your personal work history to establish your minimum required time. Begin with your most recent employer first. List all positions you have held. Account for all the time between your first and last construction related employment listing whether the work done was construction related or not. Please note that time worked **MUST** be verifiable. It may be easier to have time worked documented in letter form from former employers. Failure to provide this information may be cause to delay or cause denial by the Contractor's board.

Employer Name	Address	Phone	Position Held and Primary Duties (i.e. project mgr, superintendent Foreman carpenter, laborer, etc.)	Time Frame
RAW CONST.	5351 LIUCAN <sup>ST</sup>		MANAGER - ✓ PRESIDENT	1/89-12/03

If you need additional space, please attach a separate page.





February 18, 2015

The City of Cody  
1338 Rumsey Ave.  
PO Box 2200  
Cody, WY 82414

Subject: Letter of Recommendation

To whom it may concern:

In today's construction market of ever-increasing complexity and ever-shortening schedules, it becomes paramount that a general contractor's core group of subcontractors is comprised of top-notch companies who are willing to step up to the plate to get the job done on time and within budget. First Stage Renovations has proven themselves time and again to be worthy of a top performer designation.

From the moment that First Stage Renovations walks on the job site, it is apparent that behind the extremely friendly exterior there lies a team of dedicated professionals who take their job seriously. We have had the pleasure of working on both small and large demolition projects together and the owners and employees treat all of the projects with the same attention, precaution and detail.

The relationship between Jordy Construction and First Stage Renovations began over a decade ago. Based on their quality of workmanship, integrity of their personnel, and consideration for the clients' budgets and timeframes we will continue to use their services on a regular basis.

Sincerely,

A handwritten signature in black ink, appearing to be 'R. Rosenow', written over a light blue horizontal line.

Ross Rosenow  
Vice President  
Jordy Construction



Philip Pearson  
Swinerton Builders  
6890 West 52<sup>nd</sup> Avenue  
Arvada, CO 80002-3901  
February 18, 2015

To Whom It May Concern:

We have worked with First Stage Renovations, LLC on a number of projects. We have found them to be a very professional and caring company.

We have been a General Contractor for over 127 years. The projects that we have done with First Stage Renovations, LLC have been the smoothest projects that I have worked on during the construction phase.

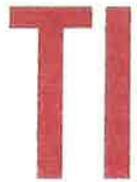
I have found that their additional work costs are fair and they perform their work in a timely fashion and have met the schedules for the projects.

They work hard and strive to give the best quality possible.

Should you have any questions please feel free to call me at 303-881-9576

Sincerely,

Philip Pearson  
Project Manager



**Tenant Improvement  
Construction Corp.**

City of Cody  
1338 Rumsey Avenue  
P.O. Box 2200  
Cody, Wyoming 82414

To Whom it May Concern:

We have worked with First Stage Renovations, LLC on several projects. We have found them to be a very professional and caring company.

We have been a General Contractor for 20 years. The projects that we have done with First Stage Renovations, LLC have been the smoothest projects that I have worked on during the construction phase.

I have found that their additional work costs are fair, and that they perform their work in a timely manner. They regularly meet the schedules set out for our projects.

I feel that they work hard and strive to provide the best quality possible.

Should you have any questions please feel free to call me at 720-475-1247.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Angelo M. Duncan', with a stylized flourish at the end.

Angelo M. Duncan  
President  
Tenant Improvement Construction Corporation

2/18/15

Guy Hill Jr.  
Project Manager  
Layton Construction  
9090 S. Sandy Parkway  
Sandy, UT 84070

Re: West Park Hospital Cody, Wyoming

I'm pleased to offer this letter of recommendation for First Stage Renovations based on my experience with them on previous projects including Presbyterian St. Luke's which just closed.

First Stage was a subcontractor in renovation for Presbyterian St. Luke's which was a renovation of an existing healthcare facility. The project was started October 13<sup>th</sup>, 2013 and finished June 2014. First Stage completed the job on a timely and professional manner.

We look forward to working with First Stage Renovations on future projects.

Sincerely,

*Guy Hill Jr.*

Application Fee: \$50.00

License Fee: \$100.00

CITY OF CODY  
Contractors' License Prequalification Statement

*(Handwritten mark)*

Business Name: JRP Construction LLC. Date: \_\_\_\_\_

DBA: \_\_\_\_\_  Corporation  Partnership  Sole Proprietor

Location: 355 Overland Trail City: Powell State: WY Zip: 82435

Mailing Address: 355 Overland Trail City: Powell State: WY Zip: 82435

Phone: \_\_\_\_\_ Cell: 307-899-8852 Fax: \_\_\_\_\_

E-mail: r.pollock@live.com

License: Class A General Contractor, Category 1 or Category 2 / Class B / Class C

Specific Area of Work: General Contractor Class A

Which of the following do you have and maintain sufficiently to comply with all Federal, State and Local laws?

State Sales Tax ID: Yes: \_\_\_\_\_ No:  Number: \_\_\_\_\_

Federal ID: Yes:  No: \_\_\_\_\_ Number: 47-2979755

State ID: Yes:  No: \_\_\_\_\_ Number: 2015-000679917

Workmen's Compensation: Yes: \_\_\_\_\_ No: \_\_\_\_\_ Number: \_\_\_\_\_

Public Liability and Property Damage: Company: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Number: \_\_\_\_\_

Name of Principals (Including Positions and Local Representatives)

Name: James O. Pollock Position: president Email: \_\_\_\_\_ Phone: 307.899-8852

Name: Robbin Pollock Position: vice president Email: r.pollock@live.com Phone: 307.899-1179

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Have you previously applied for a license in Cody? NO When? \_\_\_\_\_

Good Until: \_\_\_\_\_

How long has your organization been in business? since 1-28-15

Under this name? yes Other names? \_\_\_\_\_

List experience and/or qualifications which may apply to the license application: \_\_\_\_\_

Have been in construction for 35 yrs.  
I have 2 yrs college in construction Technology

Have you ever filed bankruptcy or failed on any financial obligations? No

If so, give specifics: \_\_\_\_\_

Have you or other principals failed to complete any work awarded to you? No

If so, where, when and why? \_\_\_\_\_

Are you familiar with the codes and regulations in Cody concerning your work areas? Yes

Name and address of Master License where applicable: \_\_\_\_\_

The above are true and accurate to the best of my knowledge and belief. References may be verified. I am aware that any false statements shall void this application.

Name of Organization  
JRP Construction, LLC  
By: [Signature]

State of Wyoming

SS

County of Park

The foregoing instrument was acknowledged before me by James Pollock

this 20<sup>th</sup> day of February, 2015.

Witness my hand and official seal.



Utana Dye  
Notary Public

My commission expires May 6, 2015.

Chairman of the Board \_\_\_\_\_ Approve \_\_\_\_\_ Deny \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_







February 13, 2015

To Whom It May Concern:

I was pleased to have been asked by Jim Pollock to write him a letter of recommendation.

Over the past ten years I have relied on Jim to do work for me on several projects. I have found him to be a true craftsman in his trade. I have always been happy with his work. Jim is someone that can be trusted to do an honest job with quality workmanship.

He is proficient in all aspects of construction, but I have found him to be especially gifted with logs and timbers. He has done some beautiful work for me along those lines. He is also a talented framer. He has done an excellent job for me on some difficult jobs and some truly complicated rooflines. He has done large custom homes and also some large commercial jobs for our company.

I have no reservations in giving Jim an excellent recommendation. Should you have any questions, please feel free to call. My cell phone number is (307) 202-0691.

Sincerely,

A handwritten signature in blue ink that reads "Daniel B. Bennion".

Daniel B. Bennion, President

Reference letter for Jim Pollock

To whom it may concern:

Jim has worked on projects for me in the Cody area for a number of years. I highly recommend him because of his work ethic, and knowledge of building. He has many years of experience and understands structural principles.

Please accept this letter of reference for Jim.



Gary Stehlfund

General Contractor



Wyoming (WAM) General Building  
Contractor A



Candidate ID: JP386066

Name: JIM POLLOCK

Date: 2/19/2009

Address: 513 6TH ST

Birth Date: Invalid DateTime.

CODY WY 82414

**EXAMINATION RESULT: PASS**

Congratulations! You have passed the above named examination. You will receive an official letter from ICC confirming this status within three to four weeks of examination.

It is extremely important that you notify Pearson VUE and ICC of any changes in name and/or address to avoid the possibility of your letter not being received. Please contact Pearson VUE at 877-234-6082 and ICC at 888-422-7233 ext. 33815 with changes to your name and address.

Application Fee: \$50.00

License Fee: \$100.00

CITY OF CODY  
Contractors' License Prequalification Statement

Business Name: Vantassel Proctor Date: 2/18/15

DBA: Vantassel Proctor  Corporation  Partnership  Sole Proprietor

Location: 5110 Talley Road City: Little Rock State: AR Zip: 72204

Mailing Address: 5110 Talley Road City: Little Rock State: AR Zip: 72204

Phone: 501-219-8899 Cell: \_\_\_\_\_ Fax: 501-219-8855

E-mail: ttbomas@vpcconstruct.com

License: Class A General Contractor, Category 1 or Category 2 / Class B / Class C

Specific Area of Work: Commercial Contracting

Which of the following do you have and maintain sufficiently to comply with all Federal, State and Local laws?

State Sales Tax ID: Yes: \_\_\_\_\_ No: \_\_\_\_\_ Number: \_\_\_\_\_

Federal ID: Yes: X No: \_\_\_\_\_ Number: 71-0754306

State ID: Yes: X No: \_\_\_\_\_ Number: 263016

Workmen's Compensation: Yes: X No: \_\_\_\_\_ Number: WC 3 609 225

Public Liability and Property Damage: Company: Bituminous Casualty Corp.

Expiration Date: 9/1/15 Number: CLP 3 609 224

Name of Principals (Including Positions and Local Representatives)

Name: K. Ted Vantassel Position: President Email: tvantassel@vpcconstruct.com Phone: 501-219-8899

Name: T. Scott Proctor Position: Vice President Email: tproctor@vpcconstruct.com Phone: 501-219-8899

Name: Jack Christie Position: Comptroller Email: jchristie@vpcconstruct.com Phone: 501-219-8899

Have you previously applied for a license in Cody? No When? \_\_\_\_\_

Good Until: \_\_\_\_\_

How long has your organization been in business? 1994 - 21 years

Under this name? yes Other names? \_\_\_\_\_

List experience and/or qualifications which may apply to the license application: \_\_\_\_\_

General Contractors License has been held in good standing for the following states: Arkansas, California, Arizona, Louisiana, New Mexico, Washington, Ohio, Tennessee, Independent Cities in Colorado - Grand Junction, RIFLE, Aurora

Have you ever filed bankruptcy or failed on any financial obligations? No

If so, give specifics: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you or other principals failed to complete any work awarded to you? No

If so, where, when and why? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you familiar with the codes and regulations in Cody concerning your work areas? yes

Name and address of Master License where applicable: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The above are true and accurate to the best of my knowledge and belief. References may be verified. I am aware that any false statements shall void this application.

Name of Organization  
Vantassel Proctor  
By: Mike Thomas, President

State of Arkansas

SS

County of Pulaski

The foregoing instrument was acknowledged before me by the president of the Corporation

this 19 day of February, 2015.

Witness my hand and official seal.



Teena Ann Thomas  
Notary Public

My commission expires 02-06-24.

Chairman of the Board \_\_\_\_\_ Approve \_\_\_\_\_ Deny \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2014-2015  
Projects

**COMPANY PROJECT HISTORY**

Please provide a list of specific projects.

Project Name	Owners Name	Address	Phone	Scope	Time Frame
2014 AutoZone	AutoZone	1038 Coffeen Sheridan, WY 8771	901-495-8771	Ground up Construction	3 mo
2014 AutoZone	AutoZone	2510 Santa Rosa Ave Santa Rosa, CA		7,000 SF Remodel	35 days
2014 AutoZone	AutoZone	1535 W. Locust Davenport, IA		7,200 SF Addition	3 mo
2014 AutoZone	AutoZone	2600 W. Central El Dorado, KS		7,200 SF Remodel	28 days
2014 AutoZone	AutoZone	4450 E. Baseline Rd Mesa, AZ		6,800 SF New Construction	3 mo
2014 AutoZone	AutoZone	Stearns Road Bartlett, IL		7,144 SF Remodel	35 days
2014 AutoZone	AutoZone	289 Lake Dr. Springtown, TX		6,300 SF New Construction	3.5 mo
2014 AutoZone	AutoZone	11205 S. Hastings Eau Claire, WI		7,300 SF New Construction	3.5 mo
2014 AutoZone	AutoZone	1255 Carpenter Roseville, MI		6,800 SF New Construction	4 mo
2014 AutoZone	AutoZone	16440 W. Yuma Goodyear, AZ		7,300 SF New Construction	3.5 mo
2014 AutoZone	AutoZone	1885 W. Berkeley Phoenix, AZ		7,100 SF New Construction	3 mo
<del>2014</del> 2014 AutoZone	AutoZone	12570 N. Beach Ft. Worth, TX		6,800 SF New Construction	4 mo
AutoZone	AutoZone	1711 University Oxford, MS		7,300 SF New Construction	4 mo
AutoZone	AutoZone	70522 Hwy 21 Covington, LA		6,100 SF New Construction	3 mo

If you need additional space, please attach a separate page.

**PERSONAL WORK HISTORY**

Please provide your personal work history to establish your minimum required time. Begin with your most recent employer first. List all positions you have held. Account for all the time between your first and last construction related employment listing whether the work done was construction related or not. Please note that time worked MUST be verifiable. It may be easier to have time worked documented in letter form from former employers. Failure to provide this information may be cause to delay or cause denial by the Contractor's board.

Employer Name	Address	Phone	Position Held and Primary Duties (i.e. project mgr, superintendent Foreman carpenter, laborer, etc.)	Time Frame
Please Refer to Attached Resume - If additional				
Resumes are Required, please let me know				
Teena Thomas, Coordinator Vantassel Proctor				

If you need additional space, please attach a separate page.

# Timothy E. Noonan

7 Longlea Cove  
Little Rock, AR 72212

501-224-1280 home  
501-804-8659 Mobile

## Profile

Experienced technical manager with skills in all aspects of project management and project engineering, which include operational planning and control, project development, cost estimating and bid preparation, material resource planning and inventory control/quality control, accounting and financial analysis, capital equipment justification, owner/subcontractor/vendor/field relations and contract negotiation and execution. Exceptional organizational, written and oral communication skills.

## Professional Experience

### Project Manager/Estimator

Van Tassel Proctor Inc., Little Rock, Arkansas, 2005- Present

- Responsible for the estimation, negotiation, execution and management of regional commercial and retail construction projects.

### Partner

Bell-Corley Construction, LLC, Little Rock, Arkansas, 2002–2005

- Responsible for the administration, operation and financial management of a start-up commercial construction firm, as well as, estimation, negotiation, execution and management of regional commercial and retail construction projects.

### Project Manager/Vice President

Nabholz Construction Corp., Little Rock, Arkansas, 1997-2002

- Responsible for the estimation, negotiation, execution and management of regional commercial/industrial/retail construction projects.

### Project Manager/Estimator

May Construction Company, Little Rock, Arkansas 1994-1997

- Responsible for the estimation, negotiation, execution and management of local commercial/industrial/retail construction projects.

### Project Manager/Engineer

Vratsinas Construction Company, Little Rock, Arkansas 1992-1994

- Responsible for the development and management of general construction projects at numerous site locations throughout the United States.

### General Manager/Financial Controller

Noonan-Sullivan Elgin, Illinois, 1998-1992

- Responsible for the operations and financial management of the largest drywall and acoustic firm in the Chicago, Illinois market

### Project Engineer

McDevitt & Street Company, Charlotte, North Carolina 1987-1988

- Responsible for the management and coordination of major construction project field operations

**Education and Professional Development**

Bachelor of Science in Construction, University of Louisiana – Monroe, 1987

**Professional Affiliations:**

Associated Institute of Constructors – Certified Professional Constructor



AutoZone, Inc. • 123 S. Front Street • Memphis, TN 38103 • P: 901.495.6500 • F: 901.495.8424

To whom it may concern,

Please find this letter of reference for VanTassel Proctor General Contractors. They have been a GC in good standing for over a decade and are widely considered our top performer. Personally, I have worked with them for the last seven years. The projects they have completed have varied from size and shape and are located in most every state in the union. My territory has included TX, CA, NE, AZ, ND, SD, ID and CO in which they have worked as well. They currently have project in Ft. Worth and Irving, TX under construction. The level of professionalism, courtesy and attention to detail are rarely matched, if ever, when it comes to working on AutoZone projects. We often depend on them in tough situations or tight schedules for some stores. They are always a first call when entering new states or territories. The level of confidence and surety that comes with this type of GC is what we, as a company, look for and rarely find.

If further information or comments are needed, please feel free to call me at (901) 495-8115 or email at [steven.scott@autozone.com](mailto:steven.scott@autozone.com).

Sincerely,

A handwritten signature in blue ink, appearing to read "S. Scott", with a long horizontal line extending to the right.

Steven Scott  
Sr. Construction Project Manager  
AutoZone SSC  
Memphis, TN 38103





AutoZone, Inc. • 123 S. Front Street • Memphis, TN 38103 • P: 901.495.6500 • F: 901.495.8424

February 17, 2015

City of Cody WY

RE: AutoZone # 6278 Cody, WY

To whom it might concern:

I want to take this opportunity to express to you the job the Van tassel Proctor, Inc has done for our Company. The depth of construction knowledge by their entire staff, the fast track construction schedule approach, and the attention to detail to all of our projects has provided great results impacting on time and on budget completions of our retail stores throughout the United States.

In the past 10 years I personally had the privilege to work with this General Contractor and I am extremely please to have them as part our team

Sincerely,

A handwritten signature in blue ink that reads "Ivan Santamaria". The signature is stylized and written over a white background.

Ivan Santamaria  
Senior Construction Project Manager  
AUTOZONE, INC.

cc:  
File





123 South Front Street, Memphis, TN 38103 / (901) 495-6500

February 19, 2015

To Whom It May Concern:

I am writing this letter of recommendation in regards to VanTassel Proctor. Our Company has successfully completed many projects with VanTassel Proctor over the past 18 years. We have been very satisfied with the level of commitment, competency and attention to detail that each of the projects were afforded.

We view our relationship with VanTassel Proctor as a partnership. They continually provide the best value for our projects by incorporating strong office management and experienced, knowledgeable job site personnel and subcontractors.

We value our relationship with VanTassel Proctor and recommend them without any reservation.

Sincerely,

A handwritten signature in black ink that reads 'Bryan Houston'.

Bryan Houston  
AutoZone, Inc.  
Regional Construction Manager, West Region  
Customer Satisfaction





Store Development

123 S. Front St., 3<sup>rd</sup> Floor Memphis, TN 38103  
(800) 285-2223 ext. 8706 Fax (901) 495-8969  
E-mail: phil.pecord@autozone.com

Letter of Transmittal

February 19, 2015

City of Cody  
Building Dept  
1338 Rumsey Ave  
Cody, WY 82414-3713

RE: VanTassel Proctor Construction Co.

To Whom It May Concern

I am writing this letter of recommendation for VanTassel proctor Construction Co. Over the past 18+ years AutoZone has constructed and opened several hundred stores in a number of states. The company is valued as one of our best contractors in delivering to AutoZone a quality project within our designated schedule. It is to that level of commitment that we continue to value them as a construction partner.

If you have any questions or comments regarding the enclosures or need additional information, please contact me. Thank you for your assistance.

Sincerely,

AutoZone Inc.

A handwritten signature in black ink that reads "Phillip Pecord". The signature is written in a cursive, slightly slanted style.

Phillip Pecord  
Architect

AutoZone Store Development

# **BOEN ENTERPRISES LLC**

P.O. Box 22407 • Little Rock, AR 72221

Phone: 501-219-0919  
Fax: 501-219-0755  
land9685@commercialrealtyllc.com

February 19, 2015

To whom it may concern:

VanTassel Proctor has completed various construction projects within the last 17 years for this company and its affiliates.

Through the many projects, VanTassel has always been and still remains, mindful of the construction timeframe and budget and our firm has always appreciated their professional approach to our projects. Boen Enterprises LLC will continue to work with VanTassel Proctor and highly recommend their firm.

If necessary, you can contact me to discuss our relationship.

Regards,



Leonard Boen



# OFFICIAL RESULTS REPORT



National Standard General Building Contractor (A)

Name: TIMOTHY NOONAN

Candidate ID: TN426415

Address: 7/ LONGLEA COVE

Date: 5/6/2010

LITTLE ROCK AR 72212

## EXAMINATION RESULT: PASS

**Congratulations! You have passed the above-named examination. You will be able to verify your pass status on the ICC website within 48-72 business hours after your exam. Please contact your participating jurisdiction if you wish to pursue licensing.**

A passing score on this examination satisfies the testing requirements for licensure only, and does not guarantee that licensing will be granted. The candidate must also satisfy all local ordinance requirements in each jurisdiction where licensing is desired.

It is extremely important that you notify Pearson VUE and ICC of any changes in name and/or address to avoid the possibility of future correspondence not being received. Please contact both Pearson VUE at 877-234-6082 and ICC at 866-750-2579 with changes to your name and address.

ICC reserves the right to amend or withhold any examination scores if, in its sole opinion, there is adequate reason to question their validity.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
2/17/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> BancorpSouth Insurance Services, Inc. 8315 Cantrell Road, Suite 300 Little Rock AR 72227	<b>CONTACT NAME:</b> Carolyn Hunter <b>PHONE (A/C, No., Ext):</b> 501-664-7705 <b>E-MAIL ADDRESS:</b> Carolyn.Hunter@bxsi.com	<b>FAX (A/C, No.):</b> 501-664-8052													
	<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A : Navigators Insurance Company</td> <td>42307</td> </tr> <tr> <td>INSURER B : Bituminous Fire &amp; Marine Insurance</td> <td>20109</td> </tr> <tr> <td>INSURER C : Bituminous Casualty Corp.</td> <td>20095</td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </tbody> </table>		INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Navigators Insurance Company	42307	INSURER B : Bituminous Fire & Marine Insurance	20109	INSURER C : Bituminous Casualty Corp.	20095	INSURER D :		INSURER E :		INSURER F :
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INSURER D :															
INSURER E :															
INSURER F :															
<b>INSURED</b> Van Tassel- Proctor, Inc. 5110 Talley Road Little Rock AR 72204	<b>CERTIFICATE NUMBER:</b> VANTASS-02														

**COVERAGES** **CERTIFICATE NUMBER:** 1104411903 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
C	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:	Y	Y	CLP 3 609 224	9/1/2014	9/1/2015	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
C	<b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	Y	Y	CAP 3 609 226	9/1/2014	9/1/2015	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$	Y	Y	CH13EXC715090IV	9/1/2014	9/1/2015	EACH OCCURRENCE \$10,000,000 AGGREGATE \$10,000,000 \$
B	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y	N/A	WC 3 609 225	9/1/2014	9/1/2015	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**

General liability policy includes certificate holder as an additional insured when required by written contract but only with respect to liability arising out of a named insured's work for additional insured including Products/Completed Operations coverage and in no way will the additional insured status exceed the limits, terms or conditions of the policy. Primary & Non-Contributory wording applies when required by written contract.

Auto liability policy includes certificate holder as an additional insured when required by written contract but only with respect to the legal See Attached...

<b>CERTIFICATE HOLDER</b>  City of Cody, WY PO Box 2200 Cody WY 82414	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE 
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**ADDITIONAL REMARKS SCHEDULE**

AGENCY BancorpSouth Insurance Services, Inc.		NAMED INSURED Van Tassel- Proctor, Inc. 5110 Talley Road Little Rock AR 72204	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

**ADDITIONAL REMARKS**

**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,  
FORM NUMBER: 25 FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE**

responsibility for acts or omissions of a person for whom liability coverage is afforded under this policy but in no event shall such coverage exceed the limits, terms or conditions of the policy.

General Liability, Auto Liability and Workers Compensation policies include waiver of subrogation in favor of certificate holder when required by written contract but in no event shall such coverage exceed the limits, terms or conditions of the policy.

Workers' Compensation policies include coverage for all states, with the exception of monopolistic states. Stop Gap coverage is provided for Employers Liability for monopolistic states.

Application Fee: \$50.00

License Fee: \$100.00

CITY OF CODY  
Contractors' License Prequalification Statement

Business Name: Sure Steel, Inc. Date: \_\_\_\_\_

DBA: \_\_\_\_\_  Corporation  Partnership  Sole Proprietor

Location: 7528 S. Cornia Dr. City: So. Weber State: UT Zip: 84405

Mailing Address: 7528 S. Cornia Dr. City: So. Weber State: UT Zip: 84405

Phone: 801-917-5800 Cell: \_\_\_\_\_ Fax: 801-917-5799

E-mail: nporter@suresteel.com

License: Class A General Contractor / Class B Electrical, Plumbing, HVAC / Class C Other  
Specific Area of Work: Steel Erection

Which of the following do you have and maintain sufficiently to comply with all Federal, State and Local laws?

State Sales Tax ID: Yes: X No: \_\_\_\_\_ Number: 12540122002-STC

Federal ID: Yes: X No: \_\_\_\_\_ Number: 87-0509964

State ID: Yes: N/A No: \_\_\_\_\_ Number: \_\_\_\_\_

Workmen's Compensation: Yes: X No: \_\_\_\_\_ Number: 003854516

Public Liability and Property Damage: Company: The Presidio Group, Inc.

Expiration Date: 07/01/2015 Number: GL7133040

Name of Principals (Including Positions and Local Representatives)

Name: Mark Carter Position: Owner Email: mcarter@suresteel.com Phone: 801-917-5800

Name: Jim Burwell Position: Owner Email: jburwell@suresteel.com Phone: 801-917-5800

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Have you previously applied for a license in Cody? No When? \_\_\_\_\_

Good Until: \_\_\_\_\_

How long has your organization been in business? 21 Years

Under this name? Sure Steel, Inc. Other names? \_\_\_\_\_

List experience and/or qualifications which may apply to the license application: Sure Steel has been operating for 21 years and is AISC certified. We currently have a 0.54 EMR safety rating and we are ranked #4 on ENR Top Erector List. See the attached Project History list regarding experience.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever filed bankruptcy or failed on any financial obligations? No

If so, give specifics: \_\_\_\_\_

Have you or other principals failed to complete any work awarded to you? No

If so, where, when and why? \_\_\_\_\_

Are you familiar with the codes and regulations in Cody concerning your work areas? Yes

Name and address of Master License where applicable: N/A

The above are true and accurate to the best of my knowledge and belief. References may be verified. I am aware that any false statements shall void this application.

Name of Organization

Sure Steel, Inc.

By: \_\_\_\_\_



State of Utah

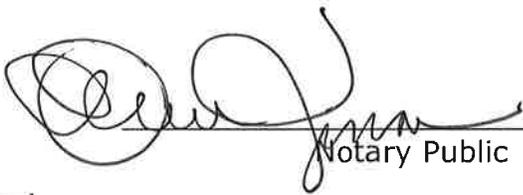
SS

County of Davis

The foregoing instrument was acknowledged before me by Mark Carter

this 4 day of February, 2015.

Witness my hand and official seal.

  
Notary Public

My commission expires 11-3-15.

Chairman of the Board \_\_\_\_\_ Approve \_\_\_\_\_ Deny \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



# Sure Steel, Inc. - Project History

PROJECT NAME	OWNER'S NAME	CITY	STATE	SCOPE	PROJECT START DATE
HELEMANO MILITARY RESERVE TEMF	Government	OAHU	HI	Steel Supply & Erection	3rd QTR 2011
FALCON HILL	Military	CLEARFIELD	UT	Steel Supply & Erection	1ST QRT/2011
NEWFIELD INJECTING BUILDING	Newfield	MYTON	UT	Steel Supply & Erection	3/1/2011
HONDURAS TEMPLE	LDS	TEGUCIGALPA	HON	Steel Supply & Erection	2/4/2011
IRS 100K CONSOLIDATED OFFICE	IRS	OGDEN	UT	Steel Supply & Erection	6/1/2011
CORTEZ HILLS TRUCKWASH REPAIR	Barrick Gold of North America	CARLIN	NV	Steel Supply & Erection	4/1/2011
CORTEZ HILLS TRUCKWASH LABOR	Barrick Gold of North America	CARLIN	NV	Steel Supply & Erection	4/1/2011
SYSCO LINCOLN	Sysco	LINCOLN	NE	Steel Supply & Erection	May/June 2011
U OF U GUEST HOUSE	University of Utah	SLC	UT	Steel Supply & Erection	5/1/2011
NEWMONT TWIN CREEKS SAGE MILL	Newmont	WINNEMUCCA	NV	Steel Supply & Erection	5/16/2011
HAFB MISSILE RELOCATION	Hill Air Force Base	LAYTON	UT	Steel Supply & Erection	6/1/2011
SWIRE COCA-COLA PHASE II	Coca-Cola	DRAPER	UT	Steel Supply & Erection	7/1/2011
RIO TINTO REGIONAL CENTER	Rio Tinto	SOUTH JORDAN	UT	Steel Supply & Erection	5/1/2011
BARRICK PASTE PLANT	Barrick Gold of North America	CARLIN	NV	Steel Supply & Erection	4/1/2012
SALT LAKE OFFICE BUILDING	KDC MLH Venture LLC	SLC	UT	Steel Supply & Erection	7/1/2011
SL TEMPLE	LDS	SLC	UT	Steel Supply & Erection	6/1/2011
MIDWESTERN PIPELINE SERVICES		CHEYENNE	WY	Steel Supply & Erection	END JULY
CIC NEWMONT EMIGRANT	Newmont	CARLIN	NV	Steel Supply & Erection	9/1/2011
NEWMONT FILTER BUILDING LIGHT CAP	Newmont	CARLIN	NV	Steel Supply & Erection	10/1/2011
ADOBE	Adobe	LEHI	UT	Steel Supply & Erection	SEPT
TROJAN CENTURY FIELD	Morgan School District	MORGAN	UT	Steel Supply & Erection	SEPT
MOLYCORP PROJECT	Molycorp	MOUNTAIN PASS	CA	Steel Supply & Erection	1ST QTR 2012
IM FLASH TECHNOLOGIES BLDG 40		LEHI	UT	Steel Supply & Erection	9/1/2011
HICKAM AFB	Hickam Air Force Base		HI	Steel Supply & Erection	5/1/2012
KENNECOTT COPPERFIELD TRUCK SHOP	Rio Tinto	COPPERTON	UT	Steel Supply & Erection	9/1/2012
KENNECOTT MAP SHEETING	Rio Tinto	COPPERTON	UT	Steel Supply & Erection	1ST QTR 2012
PROVO REC CENTER	Provo City	PROVO	UT	Steel Supply & Erection	1ST QTR 2012
OGDEN TEMPLE TOWER CRANE	LDS	OGDEN	UT	Steel Supply & Erection	10/1/2011
KUCC SOUTH WALL FUEL & LUBE	Rio Tinto	COPPERTON	UT	Steel Supply & Erection	4/1/2012
NEWMONT PHOENIX MILL EXPANSION	Newmont	BATTLE MTN	NV	Steel Supply & Erection	3/1/2012
HEXELL PROJECT ICE CREAM	Hexell	WEST VALLEY CITY	UT	Steel Supply & Erection	5/1/2012
NEWMONT PERU CONGA	Newmont	CAJAMARCA	PERU	Steel Supply & Erection	3/1/2012
EBAY	Ebay	DRAPER	UT	Steel Supply & Erection	5/1/2012
HAFB MISSILE REPLACEMENT	Hill Air Force Base	HAFB	UT	Steel Supply & Erection	4/1/2012
SL TEMPLE MODULE 5	LDS	SLC	UT	Steel Supply & Erection	4/1/2012
MORENOI 55K METCALF EXPANSION	FMI	MORENOI	AZ	Steel Supply & Erection	3/1/2012
BAGDAD FLOATION CIRCUIT PROJECT	FMI	BAGDAD	AZ	Steel Supply & Erection	5/1/2012
SILVERCREEK HOSPITAL	Silvercreek		CA	Steel Supply & Erection	6/1/2012
MOLYCORP UTILITY PUMP HOUSE	Molycorp	MOUNTAIN PASS	CA	Steel Supply & Erection	5/1/2012
PAYSON TEMPLE	LDS	PAYSON	UT	Steel Supply & Erection	7/1/2012
KUC ROUGHER FLOATION	Rio Tinto	COPPERTON	UT	Steel Supply & Erection	10/1/2012
KUC SOUTH WALL PROJCT	Rio Tinto	COPPERTON	UT	Steel Supply & Erection	9/1/2012
NEWMONT PHOENIX COPPER LEACH	Newmont	BATTLE MTN	UT	Steel Supply & Erection	9/1/2012
KUCC 6190 CHANGE HOUSE	Rio Tinto	COPPERTON	UT	Steel Supply & Erection	11/1/2012
BARRICK GOLDSTRIKE WATER TREATMENT	Barrick Gold of North America	CARLIN	NV	Steel Supply & Erection	1/1/2013
GSLM BOILER PLANT		LITTLE MOUNTAIN	UT	Steel Supply & Erection	11/1/2012
KUC SOUTH WALL EMERGENCY SERVICES	Rio Tinto	COPPERTON	UT	Steel Supply & Erection	12/1/2012



# Sure Steel, Inc. - Project History

PROJECT NAME	OWNER'S NAME	CITY	STATE	SCOPE	PROJECT START DATE
KAUAI BIOMASS POWER PLANT	Kauai Biomass	KAUAI	HI	Steel Supply & Erection	5/1/2013
X-ACTWARE OFFICE BUILDING	Xactware	LEHI	UT	Steel Supply & Erection	2/1/2013
HYCROFT EXPANSION PROJECT	Hycroft	WINNEMUCCA	NV	Steel Supply & Erection	12/1/2012
BARRICK TCM LEACH	Barrick Gold of North America	CARLIN	NV	Steel Supply & Erection	12/1/2012
SYSCO SACRAMENTO	Sysco	SACRAMENTO	CA	Steel Supply & Erection	6/1/2013
NEWMONT LEEVILLE	Newmont	CARLIN	NV	Steel Supply & Erection	7/15/2013
RESTAURANT DEPOT SAN FRANCISCO	City of San Francisco	SAN FRANCISCO	CA	Steel Supply & Erection	4/1/2013
NEWMONT LEEVILLE COMPRESSOR BLDG	Newmont	CARLIN	NV	Steel Supply & Erection	5/1/2013
PACIFIC CO NAUGHTON T&M	Pacific Co.	KEMMERER	WY	Steel Supply & Erection	10/1/2010
LAKE TAHOE VACATION RESORT	City of Lake Tahoe	TAHOE	CA	Steel Supply & Erection	4/29/2013
FREEPORT WEST	State of Utah	SALT LAKE CITY	UT	Steel Supply & Erection	4/29/2013
LARAMIE COUNTY FAIRGROUNDS	Laramie County	LOVELAND	CO	Steel Supply & Erection	5/6/2013
SHOPS @ SUMMERLIN	Howard Hughes	LAS VEGAS	NV	Steel Supply & Erection	9/9/2013
VZW ROCKLIN NEC	Verizon	ROCKLIN	CA	Steel Supply & Erection	10/1/2013
PETZL AMERICA HEADQUARTERS	Petzi	WEST VALLEY CITY	UT	Steel Supply & Erection	8/19/2013
MEADOWLARK RANCH NEW GARAGE	Larry Miller	SWAN LAKE	ID	Steel Supply & Erection	7/24/2013
ACID WATER TREATMENT EXPANSION - KUC	Rio Tinto	COPPERTON	UT	Steel Supply & Erection	8/27/2013
HYCROFT MERRILL CROWE BLDG - SHEETING	Merrill Crowe	WINNEMUCCA	NV	Steel Supply & Erection	9/9/2013
MORENCI T&M	FMI	MORENCI	AZ	Steel Supply & Erection	9/23/2013
AMARG HANGAR, DAVIS MONTHAN AFB	Air Force	TUCSON	AZ	Steel Supply & Erection	9/16/2013
KENNECOTT UTAH COPPER - MAP WINTERIZATION	Rio Tinto	COPPERTON	UT	Steel Supply & Erection	9/24/2013
CRYSTAL GEYSER ROXANE BOTTLING PLANT	Crystal Inc.	OLANCHA	CA	Steel Supply & Erection	mid-January 2014
KUC FLOTATION EXPANSION MAS	Rio Tinto	COPPERTON	UT	Steel Supply & Erection	10/1/2013
KUC FLOTATION EXPANSION SOW	Rio Tinto	COPPERTON	UT	Steel Supply & Erection	10/1/2013
LEHI MEDICAL CENTER - HOSPITAL	Rio Tinto	LEHI	UT	Steel Supply & Erection	mid-Feb 2014
FMI SAFFORD SULFIDE PROJECT-SETTLER TANK COVERS	FMI	MORENCI	UT	Steel Supply & Erection	End-March 2014
MIDWAY PAN PROJECT / MIDWAY GOLD	Midway Gold	ELY	NV	Steel Supply & Erection	7/1/2014
DILLARD'S FASHION PLACE RETRO-FIT	Dillard's	SALT LAKE CITY	UT	Steel Supply & Erection	End-Feb 2014
WEST HILLS HOSPITAL HELI-PAD	West Hills Hospital	WEST HILLS	CA	Steel Supply & Erection	March 16, 2014
TARGET	Target	SANTA ROSA	CA	Steel Supply & Erection	2/14/2014
THATCHER COMPANY OFFICE BUILDING	Thatcher Co. of Nevada	HENDERSON	NV	Steel Supply & Erection	March 2014
KUC TRUCK SHOP - FIX	Rio Tinto	COPPERTON	UT	Steel Supply & Erection	2/5/2014
KUC FEED PLATFORM	Rio Tinto	COPPERTON	UT	Steel Supply & Erection	2/5/2014
ORACLE UCF CELL 2.1	Oracle	WEST JORDAN	UT	Steel Supply & Erection	2/28/2014
BYU HERITAGE HOUSING / BLDG 7&8	BYU	PROVO	UT	Steel Supply & Erection	May 2014
SKYWEST AIRLINES HANGAR TRUSS ALTERATION	Skywest Airlines	SALT LAKE CITY	UT	Steel Supply & Erection	late May 2014
NEWMONT USA LIMITED	Newmont	ELKO	NV	Steel Supply & Erection	April 28, 2014
PROJECT NEPHOGGRAM-MICROSOFT DATA CENTER / STRUCTURAL	The TLM Group	CHEYENNE	WY	Steel Supply & Erection	July 2014
SKYWEST AIRLINES HANGAR DOOR UPGRADE	Skywest Airlines	SALT LAKE CITY	UT	Steel Supply & Erection	June 2014
PARK CITY FILM STUDIOS 7 & 7B	Park City Film Studio Development LLC	PARK CITY	UT	Steel Supply & Erection	mid-July 2014
PROJECT MONARCH - CABELA'S TOOELE DISTRIBUTION CENTER	Cabela's	TOOELE	UT	Steel Supply & Erection	7/29/2014
KETCHIKAN MEDICAL CENTER - PEACEHEALTH	City of Ketchikan	KETCHIKAN	AK	Steel Supply & Erection	9/1/2014
DILLARD'S FASHION PLACE MALL	Dillard's	MURRAY	UT	Steel Supply & Erection	7/21/2014
UTE INDIAN TRIBE JUSTICE CENTER	Ute Indian Tribe	FORT DUCHESSNE	UT	Steel Supply & Erection	11/1/2014
ORACLE UCF EXTERIOR DUMPSTER SCREEN WALL	Oracle	WEST JORDAN	UT	Steel Supply & Erection	8/25/2014
CRIPPLE CREEK & VICTOR GOLD MINING CO.	Cripple Creek & Victor	VICTOR	CO	Steel Supply & Erection	2/1/2015
PRICE REALTY GROUP	Price Realty Group	SALT LAKE CITY	UT	Steel Supply & Erection	10/20/2014



## Sure Steel, Inc. - Project History

PROJECT NAME	OWNER'S NAME	CITY	STATE	SCOPE	PROJECT START DATE
HOLDEN MINE WATER TREATMENT PLANT	Rio Tinto	WENATCHEE	WA	Steel Supply & Erection	MAR 2015
BUSINESS DEPOT OGDEN BUILDING 961	The Boyer Company	OGDEN	UT	Steel Supply & Erection	12/15/2014
DILLARD'S LIBERTY CENTER	Dillard's	LIBERTY	OH	Steel Supply & Erection	11/10/2014
KUC ROOF REPAIR	Rio Tinto	SALT LAKE CITY	UT	Steel Supply & Erection	11/10/2014
AGRIUM LONE STAR	Agrium	BORGER	TX	Steel Supply & Erection	Feb 2015

May 6, 2014

Re: Sure Steel Inc.

To Whom it May Concern,

I am working with Sure Steel, Inc. on a small but very complex project in Southern California where we are installing a helipad on top of an operational hospital intensive care unit. Brian Bowen with Sure Steel as well as all staff I have worked with at Sure Steel have gone above and beyond to assist Layton and the Owner is assuring the success of the project. The project has had many challenges related to the structural steel scope of work and Sure Steel steps up to each one to resolve the issue while understanding the big picture in protecting Layton Construction and looking out for the Owner. Given the opportunity I would enjoy the opportunity to work with Sure Steel, Inc. on another project and would highly recommend strong consideration for any Layton project.

Please contact me on my cell phone with any questions at 602-821-9007.

Thank you.

Sincerely,



Luke Halpin  
Sr. Project Manager  
Layton Construction



June 5, 2014

To Whom It May Concern,

I have had the opportunity to work with Ryan Godfrey and Bill Barlow of Sure Steel on the Utah Central Bishops Storehouse project for the LDS Church in Salt Lake City, Utah. Ryan, Bill and their team performed very well for Layton Construction in an accelerated schedule and they were quick to resolve concerns as they arose, even if they were not involving their scope of work. This project required a high level of quality which Sure Steel achieved. Sure Steel did a great job of keeping the structure safe for their employees and other subcontractors. They were a team player and instrumental in the success of the project erecting a 550,000 SF storehouse building in 11 weeks. Ryan did a great job of ensuring that the structural steel, open web joists and metal decking were delivered to the job site in a timely fashion so as to not hold up the erection schedule. I would recommend using Sure Steel and look forward to using them again on future projects.

Respectfully,

A handwritten signature in blue ink, appearing to read "Matt Noyce", is written over a light blue horizontal line.

Matt Noyce  
Project Manager  
Layton Construction Co., Inc.

Rio Tinto Project Development & Implementation  
4700 Daybreak Parkway  
South Jordan, UT 84095  
USA  
T 801-554-1637  
F 801-569-6048

Mr. Mark Carter  
Chief Executive Officer  
Sure Steel Inc.  
7528 So. Cornia Dr.  
South Weber, UT 84405

July 20, 2012

Dear Mark

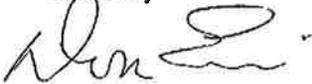
**Letter of Appreciation**

This letter is to express the appreciation of Kennecott Utah Copper (KUC) and Rio Tinto Project Development & Implementation (PDI) for your firm's efforts to embrace an objective of Zero Harm and performance on the Cornerstone Truck Shop Expansion project at the Bingham Canyon Mine.

KUC and Rio Tinto recognize the need and have a desire to continuously improve towards a Zero Harm workplace at all of our business units and projects and are actively taking steps to do so. Following the medical recordable incident, which occurred in November 2011 with a Sure Steel worker on the Truck Shop expansion project, our project management team and Sure Steel executive and site management staff and workforce, significantly improved the job safety planning process to achieve safe project execution. We are very pleased, as I am sure are you, with the outstanding results of these efforts – zero first aid, medical recordable or lost time injuries! To simply state, every person went home to their family and to enjoy their life without injury, which is what Zero Harm is all about.

The Truck Shop Expansion project required a very significant planning and execution approach to safely achieve a Rio Tinto schedule milestone for the main truck shop building steel, roofing and siding completion. The completion five days ahead of schedule is a tribute to the level of Sure Steel planning developed in May and the dedication of your workforce and as well as executive, project and site management. We would like to thank you for this significant effort and results achieved and look forward to continuing to work with Sure Steel on the Mine PM Shop and the Concentrator Flotation Expansion and Flocculent projects.

Yours sincerely



Don Einarson  
Deputy Project Director & General Manager – Construction, Cornerstone Project



John Thompson  
Project Manager – Mine Facilities, Cornerstone Project

cc: Cornerstone Contract File  
Tom Gibson - Rio Tinto PDI  
Rick Newnam - Rio Tinto PDI  
Bob Callahan - Fluor

April 15, 2010

Gentlemen,

This letter is reference to the excellent safety records that were accomplished on the F-22 Fueled Composite Overhaul Facility, Hill Air Force base, Utah. The project was successfully completed with over 200,000 man hours and 684 days with no lost time incidents. The project also completed the final 425 days with no recordable incidents.

Big-D recognizes that the majority of the hours worked were not by Big-D employees and the safety records are the result of yours and the other trades efforts on the project. We thank you for your efforts in completing the project on-time, safely and at the highest quality. Please accept these project T-shirts as a token of our appreciation and distribute them to those with-in your organization that helped make the project a success.

We look forward to future projects with your company and hope to continue to achieve success and safety on those projects

Thank you,

  
Rich Cox

Sr. Project Manager  
Big-D Construction

December 30, 2009

Mr. Mark Carter  
Sure Steel, Inc.  
9632 South 500 West  
Sandy, UT 84070

RE: Myriad Genetics

Dear Mr. Carter,

This letter is to commend you and your entire team for the exceptional efforts at the Myriad Genetics project. Sure Steel was a valuable partner and greatly attributed to the success of the project including the quality of construction, delivering the project on-schedule, and a no recordable safety record.

A good team is key and your team met or exceeded our expectations at every level. They were a prime player in coordination of a very technical project. Every challenge was met with good ideas, a "can do" attitude, and a willingness to work with the others. Please pass on our appreciation to all those involved in the project.

Big-D Construction and our project team recognizes your company and team's expertise, hard work and collaboration efforts and want to take the time to recognize and commend you for a job well done. Big-D Construction looks forward to the opportunity to construct future projects with your company.

With Regards,



Peggy L. Stettler  
Sr. Project Manager

Mike Dearden  
Superintendent

Brian Logie  
Project Engineer

Cc: Forrest McNabb  
Will Hopkins  
John Kemp



THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

## ADDITIONAL INSURED - OWNERS, LESSEES OR CONTRACTORS - AUTOMATIC STATUS WHEN REQUIRED IN CONSTRUCTION AGREEMENT WITH YOU

This endorsement modifies insurance provided under the following:

### COMMERCIAL GENERAL LIABILITY COVERAGE PART

**A. Section II - Who Is An Insured** is amended to include as an additional insured any person or organization for whom you are performing operations when you and such person or organization have agreed in writing in a contract or agreement that such person or organization be added as an additional insured on your policy. Such person or organization is an additional insured only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured.

However, the insurance afforded to such additional insured:

1. Only applies to the extent permitted by law; and
2. Will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

A person's or organization's status as an additional insured under this endorsement ends when your operations for that additional insured are completed.

**B.** With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to:

1. "Bodily injury", "property damage" or "personal and advertising injury" arising out of the rendering of, or the failure to render, any professional architectural, engineering or surveying services, including:

- a. The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawings and specifications; or
- b. Supervisory, inspection, architectural or engineering activities.

This exclusion applies even if the claims against any insured allege negligence or other wrongdoing in the supervision, hiring, employment, training or monitoring of others by that insured, if the "occurrence" which caused the "bodily injury" or "property damage", or the offense which caused the "personal and advertising injury", involved the rendering of or the failure to render any professional architectural, engineering or surveying services.

**2.** "Bodily injury" or "property damage" occurring after:

- a. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
- b. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

**C.** With respect to the insurance afforded to these additional insureds, the following is added to **Section III - Limits Of Insurance:**

The most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement you have entered into with the additional insured; or
2. Available under the applicable Limits of

Insurance shown in the Declarations;  
whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

## WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART  
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

### SCHEDULE

**Name Of Person Or Organization:**

PURSUANT TO APPLICABLE WRITTEN CONTRACT OR AGREEMENT YOU ENTER INTO.

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

The following is added to Paragraph 8. **Transfer Of Rights Of Recovery Against Others To Us** of Section IV - **Conditions**:

We waive any right of recovery we may have against the person or organization shown in the Schedule above because of payments we make for injury or damage arising out of your ongoing operations or "your work" done under a contract with that person or organization and included in the "products-completed operations hazard". This waiver applies only to the person or organization shown in the Schedule above.

**WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT**

This endorsement changes the policy to which it is attached effective on inception date of the policy unless a different date is indicated below.

(The following "attaching clause" need be completed only when this endorsement is issued subsequent to preparation of the policy).

This endorsement, effective 12:01 AM 07/01/2014 forms a part of Policy No. 036333087

Issued to Sure Steel

By New Hampshire Ins Co

Premium INCLUDED.

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule. This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.

This agreement shall not operate directly or indirectly to benefit any one not named in the Schedule.

**Schedule**

ANY PERSON OR ORGANIZATION TO WHOM YOU BECOME  
OBLIGATED TO WAIVE YOUR RIGHTS OF RECOVERY  
AGAINST, UNDER ANY CONTRACT OR AGREEMENT YOU  
ENTER INTO PRIOR TO THE OCCURRENCE OF LOSS.

This form is not applicable in California, Kentucky, New Hampshire, New Jersey, North Dakota, Ohio, Tennessee, Texas, Utah, or Washington.

WC 00 03 13  
(Ed. 04/84)

Countersigned by \_\_\_\_\_



Authorized Representative

**ENDORSEMENT**

This endorsement, effective 12:01 A.M. 07/01/2014 forms a part of

policy No. CA 394-54-20 issued to SURE STEEL, INC.

by NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US**

*This endorsement modifies insurance provided under the following:*

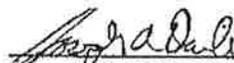
**BUSINESS AUTO COVERAGE FORM**

**Section IV - Business Auto Conditions, A. - Loss Conditions, 5. - Transfer of Rights of Recovery Against Others to Us, is amended to add:**

However, we will waive any right of recover we have against any person or organization with whom you have entered into a contract or agreement because of payments we make under this Coverage Form arising out of an "accident" or "loss" if:

- (1) The "accident" or "loss" is due to operations undertaken in accordance with the contract existing between you and such person or organization; and
- (2) The contract or agreement was entered into prior to any "accident" or "loss".

No waiver of the right of recovery will directly or indirectly apply to your employees or employees of the person or organization, and we reserve our rights or lien to be reimbursed from any recovery funds obtained by any injured employee.

  
\_\_\_\_\_  
AUTHORIZED REPRESENTATIVE

**ENDORSEMENT**

This endorsement, effective 12:01 A.M. 07/01/2014 forms a part of

policy No. CA 394-54-20 issued to SURE STEEL, INC.

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**WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US**

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BUSINESS AUTO COVERAGE FORM

**Section IV - Business Auto Conditions, A. - Loss Conditions, 5. - Transfer of Rights of Recovery Against Others to Us**, is amended to add:

However, we will waive any right of recover we have against any person or organization with whom you have entered into a contract or agreement because of payments we make under this Coverage Form arising out of an "accident" or "loss" if:

- (1) The "accident" or "loss" is due to operations undertaken in accordance with the contract existing between you and such person or organization; and
- (2) The contract or agreement was entered into prior to any "accident" or "loss".

No waiver of the right of recovery will directly or indirectly apply to your employees or employees of the person or organization, and we reserve our rights or lien to be reimbursed from any recovery funds obtained by any injured employee.

  
\_\_\_\_\_  
AUTHORIZED REPRESENTATIVE

Application Fee: \$50.00

License Fee: \$100.00

CITY OF CODY  
Contractors' License Prequalification Statement

Business Name: AMERICAN TRADITIONS LLC Date: 2-9-15

DBA: SOLE/M. LLC  Corporation  Partnership  Sole Proprietor

Location: IDAHO FALLS City: \_\_\_\_\_ State: IDAHO Zip: 83401

Mailing Address: 3546 E 1120 City: IDAHO FALLS State: ID Zip: 83401

Phone: 208-589-3007 Cell: SAME Fax: \_\_\_\_\_

E-mail: AMERICANTRADITIONSLLC@GMAIL.COM

License: Class A General Contractor, Category 1 or Category 2 / Class B / Class C

Specific Area of Work: MASONRY

Which of the following do you have and maintain sufficiently to comply with all Federal, State and Local laws?

State Sales Tax ID: Yes: \_\_\_\_\_ No: \_\_\_\_\_ Number: \_\_\_\_\_

Federal ID: Yes: X No: \_\_\_\_\_ Number: 46-5432205

State ID: Yes: \_\_\_\_\_ No: \_\_\_\_\_ Number: \_\_\_\_\_

Workmen's Compensation: Yes: X No: \_\_\_\_\_ Number: 647581 <sup>BOISE ID</sup> 208-332-2100

Public Liability and Property Damage: Company: HARTWELL CORPORATION

Expiration Date: 10-8-15 Number: X81054 (208-532-5656)

Name of Principals (Including Positions and Local Representatives)

Name: STEVE PLEID Position: OWNER Email: SAME AS ABOVE Phone: 208-589-3007

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Have you previously applied for a license in Cody? NO When? \_\_\_\_\_

Good Until: \_\_\_\_\_

How long has your organization been in business? 2013 - CURRENT

Under this name? AMERICAN TRADITIONS Other names? 1997 - 2011 ARIC MASONRY

List experience and/or qualifications which may apply to the license application: \_\_\_\_\_

OWNER HAS 35 YRS EXPERIENCE WITH CONC. & MASONRY

17 YRS AS CONTRACTOR FED. EX

Have you ever filed bankruptcy or failed on any financial obligations? YES

If so, give specifics: ABLE MARONEY FILED BANKRUPTCY IN 2011  
DUE TO ECONOMY HAD TO CLOSE BUSINESS

Have you or other principals failed to complete any work awarded to you? NO

If so, where, when and why? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you familiar with the codes and regulations in Cody concerning your work areas? YES

Name and address of Master License where applicable: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The above are true and accurate to the best of my knowledge and belief. References may be verified. I am aware that any false statements shall void this application.

Name of Organization

AMERICAN TRADITIONS LLC

By: STEPHEN PERRY 

State of IDAHO

SS

County of JEFFERSON

The foregoing instrument was acknowledged before me by STEPHEN PERRY

this 17 day of FEBRUARY, 2015.

Witness my hand and official seal.

  
Notary Public 

My commission expires 04-25-2020.

Chairman of the Board \_\_\_\_\_ Approve \_\_\_\_\_ Deny \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**COMPANY PROJECT HISTORY**

Please provide a list of specific projects.

Project Name	Owners Name	Address	Phone	Scope	Time Frame
RATIO WALLS & SLAB	ERIC CRAVATT	AMMON IDAHO	208 201-7690	MASONRY WALLS W/ COLUMNS STAMPED CONC. SLAB	JULY 2013
CONC. WORK	AMERICAN PUMP CO.	UCON IDAHO	208 604-3037	CONC. SLABS & FRENCH DRAIN	AUG. 2013
MOUNTAIN SAGE	DANIEL MORRIS	REXBURG IDAHO	208 317-1300	STONE WORK CONTRACT LABOUR	AUG 2013 JUNE 2014
TAYLOR FARMS	CHRIS TAYLOR	VICTOR IDAHO	MATT 208-521-4212	STONE WORK	JULY 2014
HOLY ROSARY	CATHOLIC DIOCESE OF BOISE	145 E. 9TH ST. IDAHO FAUS	208 522-4366	PRE-CAST & BRICK RESTORATION	JULY 2014 - SEPT. 2014
LDS CHURCH	ST. ANTHONY FIN GROUP	REXBURG IDAHO	RON 208-370-7184	MULTIPLE BRICK RESTORATION JOBS	JULY 2014 NOV-2014
MOUNTAIN SAGE	DANIELLE MORRIS		208 317 1300	BRICK & STONE WORK	NOV. 2014 CURRENT
GARNGER ELS.	FRANK GARNGER	REXBURG IDAHO	208 251-7102	STONE WORK	WINTER & SPRING OF 2014

If you need additional space, please attach a separate page.

**PERSONAL WORK HISTORY**

Please provide your personal work history to establish your minimum required time. Begin with your most recent employer first. List all positions you have held. Account for all the time between your first and last construction related employment listing whether the work done was construction related or not. Please note that time worked **MUST** be verifiable. It may be easier to have time worked documented in letter form from former employers. Failure to provide this information may be cause to delay or cause denial by the Contractor's board.

Employer Name	Address	Phone	Position Held and Primary Duties (i.e. project mgr, superintendent Foreman carpenter, laborer, etc.)	Time Frame
MOUNTAIN SAGE INC	3230 N. 5000 W. REX IDHO ID.	208-356-9188	MASON	2012-2014
IDaho FALLS MASONRY	IDaho FALLS	208-206-7881	MASON	2012-2013
SCHUMBERGER	YELLOWSTONE RD BELK SPRINGS WY.	307-705-3348	OIL FIELD SERVICES	2011-2012
ARL MASONRY	3540 E 112 NORTH IDaho FALLS ID.	208-589-3007	MASON	1997-2011
PEERY CONST.	HEMLET CA. TO IDaho	208-735-2838	MASON	1980-1997

If you need additional space, please attach a separate page.

February 11, 2015

To Whom It May Concern:

I am pleased to give this letter of recommendation on behalf of Steve Peery, owner of American Traditions.

I have been most fortunate to know Steve Peery for more than eight years. I have found him to be honest and meticulous in his work. I have often consulted with him for work projects of my own and find him to be a most capable contractor. He is a person of true character and a man of his word.

He would be a great benefit to any project.

Sincerely,

Robert Lee Dougal  
Dougal Construction  
2267 N. Aldercrest Pl.  
Eagle, Idaho 83616

208-861-3200



American Pump  
10758 N. Yellowstone  
P.O. Box 267  
Ucon, Idaho 83454  
Telephone: (208) 529-4517  
Fax: (208) 529-4587

February 13, 2015

To whom it may concern:

I would like to recommend Steve Peery as a contractor for concrete and masonry work. Steve has done a few jobs for us at American Pump. His work was done quickly and if he ran into problems, he found ways to resolve them. In addition Steve has done several jobs for my family including foundations, floors, and driveways. His work looks great and we haven't had any warranty problems. I believe Steve to be an honest man who does his best to ensure people are happy with his work.

Sincerely,

A handwritten signature in black ink, appearing to read "Jacob W. Hancock", with a long, sweeping underline.

Jacob Hancock  
Manager  
American Pump Co.

February 11, 2015

Bert H. Peery

434 N. 150 W.

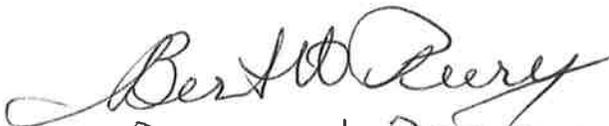
Blackfoot, ID 83221

To whom it may concern:

Steve Peery was employed in the masonry business when he was 16 years of age. He was and still is one of the best employees we had ever had. Steve works hard and is loyal to the company he is working with.

He learned the trade with Peery and Hendricks Masonry Corporation. He started his own company while living in California. He excels at anything this is brick, stone, fireplaces, etc. Whatever requires anything that is masonry Steve can do.

Steve has worked on college buildings, shopping centers, schools and church buildings, residential and restoration work. Steve does excellent work and is very professional as well as a very detailed and skilled mason. He would be an asset to any company needing his services.

  
BERT H. PEERY



[holstrk@atcnet.net](mailto:holstrk@atcnet.net) - Sales  
[accounting@holstruck.com](mailto:accounting@holstruck.com) - Accounting  
[www.holstruck.com](http://www.holstruck.com) - Website

---

I have known Steve for some time,  
He has done work for me and has  
done an excellent job, he has been honest  
and dependable at all jobs he has been  
engaged in. I have also worked with  
him in our church and found him to  
be the same

Joan Whit

To whom this may concern, .

My name is Michael Gutke and I have known Steve Peery for 38 years

And have worked as a tender for him and his Family for 30 years.

He is a very good boss and a excellent Mason and businessman.

And will do a great job with any project.

I would highly recommend him for your job.

Michael Gutke

# January Permit Comparisons

- Jan - Commercial Permits (B13-B14) New & Additions
- Jan - Residential Permits (B5-B12) New Dwellings, Additions & Garages
- Jan - General Permits (B15-B17) Misc, Fence, Signs, Plumbing/HVAC & Electrical
- Jan - Total Permits

