

**State of California**  
**APPLICATION FOR PUBLIC WORKS CONTRACTOR REGISTRATION AFFIDAVIT**  
**DEPARTMENT OF INDUSTRIAL RELATIONS**

**PWCR NUMBER: 100002757**

**CONTRACTOR INFORMATION**

Contractor Name: POMS LANDSCAPING INC

Trade Name(s): POMS LANDSCAPING  
POMS LANDSCAPING, INC.

**REGISTRATION INFORMATION**

Type: Renewal  
Fiscal Year: 2018

License Type Number(s): CSLB — 523855

Contractor Mailing Address:  
12344 SAN MATEO ROAD  
HALF MOON BAY CA 94019  
COUNTY: SAN MATEO

Contractor Physical Address:  
12344 SAN MATEO ROAD  
HALF MOON BAY CA 94019  
COUNTY: SAN MATEO

Email Address: POMSLANDSCAPING@COMCAST.NET

**WORKERS' COMPENSATION**

**PROFESSIONAL EMPLOYER ORGANIZATION (PEO)**

Do you lease employees through Professional Employer Organization?  Yes  No

**INSURED BY CARRIER**

Policyholder Name: POMS LANDSCAPING INC

Insurance Carrier: WESCO INSURANCE COMPANY

Policy Number: WWC3260977

Inception Date: 03/01/2016 Expiration Date: 03/01/2018

**CERTIFICATION**

- Yes  No I certify that I do not have any delinquent liability to an employee or the state for any assessment of back wages or related damages, interest, fines, or penalties pursuant to any final judgment, order, or determination by a court or any federal, state, or local administrative agency, including a confirmed arbitration award.
- Yes  No I certify that the contractor is not currently debarred under Section 1777.1 or under any other federal or state law providing for the debarment of contractors from public works.
- Yes  No Section 1725.5 requires all contractors, as defined by California Labor Code section 1722.1, to be registered prior to bidding on public works projects on or after March 1, 2015, or for all public works projects awarded on or after April 1, 2015. Have you bid on a public works project after March 1, 2015, or were you awarded a public works project after April 1, 2015, without first being registered with the Department of Industrial Relations?
- Yes  No I certify that one of the following is true: (1) I am licensed by the Contractors State License Board (CSLB) in accordance with Chapter 9 (commencing with Section 7000) of the Business and Professions Code; or (2) my business or trade is not subject to licensing by the CSLB.

I, LANE LOOZE POMS the undersigned, am VICE PRESIDENT, POMS LANDSCAPING INC with the authority to act for and on behalf of the above named contractor. I certify under penalty of perjury that all of the above information provided is true and correct. I further acknowledge that any untruthful information provided in this application could result in the certification being canceled.

I certify this on: 05/08/2017

**LEGAL ENTITY INFORMATION**

**LEGAL ENTITY TYPE: CORPORATION**

Corporation Number: C3186959

Treasurer: LANE L POMS

President: SCOTT H POMS

Secretary: SCOTT H POMS

Vice President: LANE L POMS

CEO: SCOTT H POMS

Agent of Service

SCOTT POMS

726 OCCIDENTAL AVENUE

SAN MATEO CA 94402

This is not a receipt.