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AGENDA

THE INDIANA PLUMBING COMMISSION

**Wednesday, May 28, 2008
at 8:00 a.m.**

**Indiana Government Center-South
402 West Washington Street, Room W072
Indianapolis, Indiana**

- I. REVIEW OF APPLICATIONS** **8:00 a.m.**

- II. CALL TO ORDER & ESTABLISHMENT OF QUORUM** **9:30 a.m.**

- III. ADOPTION OF THE AGENDA**

- IV. ADOPTION OF THE MINUTES FROM MARCH 26, 2008 MEETING OF THE COMMISSION**

- V. PERSONAL APPEARANCES** **9:45 a.m.**
 - A. Dale L. Funk
 - B. Ricky L. Wardwell

- VI. ADMINISTRATIVE HEARINGS**

None.

- VII. NOTICE OF PROPOSED DEFAULT**
 - A. In the Matter of the License of Joseph Azad**
Cause No.: IPC 07-20
Re: Notice of Proposed Default

- VIII. PETITIONS FOR REVIEW**
 - A. Nathan Bousman

- IX. DELIBERATIONS AND POSSIBLE ISSUANCE OF FINAL ORDER**
 - A. In the Matter of the Application of Shane Swinney**
Cause No.: IPC 08-03
Re: Petition for Review of Denial of licensure as journeyman plumber due to examination failure

 - B. In the Matter of the Application of Howard P. Cahill**
Cause No.: IPC 08-07
Re: Petition for Review of Denial of licensure as plumbing contractor due to examination failure
(Withdrawal of Petition)

IX. EXAMINATION LICENSURE/UNLICENSED PRACTICE

None.

X. APPLICATIONS FOR APPROVAL – PLUMBING APPRENTICE SCHOOL

None.

XI. APPLICATIONS FOR LICENSURE

- A. Plumbing Contractor
- B. Journey Plumber
- C. Apprentice Plumber

XII. REVIEW OF PROBATIONARY REPORTS

Lewis Marcotte, IPC 07-12 (Received March 31, 2008 & April 30, 2008)

XIII. DISCUSSION

- A. Request for Reinstatement of a Journeyman Plumber License
Re: Gilbert A. Ruehl
- B. Request of Reinstatement of a Plumbing Contractor License
Re: Robert Coulter
- C. Request of Reinstatement of a Plumbing Contractor License
Re: Howard P. Cahill

XIV. BOARD DIRECTOR'S REPORT

- A. Electronic Meetings

XV. OLD/NEW BUSINESS

- A. Proposed Rules/Statute Changes
Re: Changes for Exam and Fees Rule Draft
- B. RFP for Outsourcing Exam
Re: Status

XVI. ADJOURNMENT

Next Scheduled Meeting:

Wednesday, July 23, 2008
Indiana Government Center-South
Room W072
Indianapolis, IN 46204

MINUTES

THE INDIANA PLUMBING COMMISSION

**Meeting held
Wednesday, March 26, 2008**

**Indiana Government Center-South
402 West Washington Street, Room W072
Indianapolis, Indiana**

I. REVIEW OF APPLICATIONS

The Commission members reviewed applications until 9:30 a.m.

II. CALL TO ORDER & ESTABLISHMENT OF QUORUM

Mr. Ciriello called the meeting to order at 9:30 a.m. in Conference Center Room W072, 402 West Washington Street, Indianapolis, Indiana and declared a quorum in accordance with IC § 25-28.5-1.

Members Present:

William Ciriello, Chairman
Robert Synko, Secretary
Matt Buczolich
Owen Stephens
John Van Cleve

Members Not Present:

Eric Ott

State Officials Present:

Angela Smith Jones, Board Director, Indiana Professional Licensing Agency
Lorrie Ruble, Case Manager, Indiana Professional Licensing Agency
Julie Alexander, Advisory Counsel, Office of the Attorney General

III. ADOPTION OF THE AGENDA

Board Action: A motion was made to adopt the amended agenda.

Stephens/Synko
Motion carried 5/0/0

IV. ADOPTION OF THE MINUTES FROM JANUARY 23, 2008 MEETING OF THE COMMISSION

Board Action: A motion was made to adopt the minutes.

Van Cleve/Stephens
Motion carried 5/0/0

V. PERSONAL APPEARANCES

None.

VI. ADMINISTRATIVE HEARINGS

- A.** In the Matter of the Edward E. Burris
Cause No.: IPC 08-02
Re: Final Hearing

Parties and Counsel Present:

The State of Indiana was not present.
Respondent Edward Burris was present without counsel.

Participating Board Members:

William Ciriello (Hearing Officer)
Robert Synko
Matt Buczolic (recused himself)
Owen Stephens
John Van Cleve

Witnesses:

Mr. Burris

Case Summary: Respondent failed the exam and petitioned for review.

Board Action: A motion was made to accept the lead as being acceptable and give him the one point making it a passing grade based upon the appearance of the project.

Stephens/Van Cleve
Motion carried 4/0/1 (Buczolic abstained)

VII. PETITIONS FOR REVIEW

- A.** Daniel Hrasch

Board Action: A motion was made to grant the petition for review and appoint John Van Cleve as the ALJ.

Stephens/Buczolic
Motion carried 5/0/0

Board Action: A motion was made of staff to send a letter requesting a list of all employees and their license numbers, based upon the letter sent in on behalf of Dan Hrasch which seems to indicate that there are unlicensed persons working. Send the letter to Mr. Young with a copy of the letter for Dan attached.

Buczolic/Synko
Motion carried 5/0/0

- B.** Daniel Meier

Board Action: A motion was made to deny the petition for review, withdraw the previous denial and grant the approval to sit for the exam.

Buczolic/Stephens
Motion carried 5/0/0

- C.** Howard Cahill

Board Action: A motion was made to grant the petition for review and appoint John Van Cleve and Bill Ciriello as the ALJ.

Stephens/Buczolich
Motion carried 5/0/0

D. Jeremy Dykhuizen

Board Action: A motion was made to grant the petition for review and appoint John Van Cleve as the ALJ.

Stephens/Buczolich
Motion carried 5/0/0

VIII. DELIBERATIONS AND POSSIBLE ISSUANCE OF FINAL ORDERS

A. In the Matter of Samuel L. Montgomery, III

Cause No.: IPC 07-22

Re: Denial of licensure as a plumbing contractor because of examination failure.

Board Action: A motion was made to affirm the ALJ order denying admission to the journeyman plumber examination.

Stephens/Van Cleve
Motion carried 5/0/0

B. In the Matter of Lance Smith

Cause No.: IPC 08-06

Re: Withdraw of Petition (passed PC exam)

Board Action: A motion was made to grant the withdrawal.

Van Cleve/Synko
Motion carried 5/0/0

C. In the Matter of Joseph Morris

Administrative Cause No.: SBRLS 08-01

Re: Proposed Findings of Fact, Conclusions of Law, and Order

Board Action: A motion was made to approve the proposed findings of fact and settlement and permanently revoke the plumbing license.

Stephens/Synko
Motion carried 5/0/0

IX. EXAMINATION LICENSURE/UNLICENSED PRACTICE

None.

X. APPLICATIONS FOR APPROVAL – PLUMBING APPRENTICE SCHOOL

None.

XI. APPLICATIONS FOR LICENSURE

Board Action: A motion was made and seconded to approve all recommendations and decisions made by the Commission members on applications for licensure that were reviewed throughout the Commission meeting.

Buczolich/Van Cleve
Motion carried 5/0/0

XII. REVIEW OF PROBATIONARY REPORTS

Lewis Marcotte, IPC 07-12 (received probation report 2/28/08)

Board Action: A motion was made to accept his submissions and it was noted that he has paid all of the fines associated with his proceedings.

Van cleve/Synko
Motion carried 5/0/0

XIII. DISCUSSION

- A. Request for Reinstatement of Plumbing Contractor License
Re: Gary L. Link (**Rescind**)
- B. Request for Reinstatement of Plumbing Contractor License
Re: Kenneth V. Jarboe, Jr. (**Rescind**)
- C. Request for Reinstatement of Plumbing Contractor License
Re: John Kozon (**Rescind**)

Board Action: A motion was made to rescind the decision of the board denying the reinstatement of the above listed licenses which was made at the January 23, 2008, board meeting. Thus Mr. Link, Mr. Jarboe and Mr. Kozon are reinstated.

Buczolich/Van Cleve
Motion carried 5/0/0

- D. Request for Reinstatement of a Journeyman Plumber License
Re: Ricky L. Wardwell

Board Action: The commission would like additional information and requested a personal experience of Mr. Wardwell.

Buczolich/Van Cleve
Motion carried 5/0/0

- E. Request for Reinstatement of a Plumbing Contractor License
Re: Dale L. Funk

Board Action: The commission would like additional information and requested a personal experience of Mr. Funk.

Stephens/Van Cleve
Motion carried 5/0/0

- F. Request information [What can appliance service techs and maintenance persons do without a plumbing license?]
Re: Menno Hochstedler

Board Action: A motion was made to have the letter sent as written by Ciriello to Mr. Hochstedler.

Van Cleve/Stephens
Motion carried 5/0/0

- G. Request for Reinstatement of a Journeyman Plumber Contractor License
Plumbing Minutes
March 26, 2008

Re: Philip Wenger

Board Action: The commission would like additional information and requested a personal experience of Mr. Wenger.

Stephens/Van Cleve
Motion carried 5/0/0

XIV. BOARD DIRECTOR'S REPORT

No report was given.

XV. OLD/NEW BUSINESS

- A. Proposed Rules/Statute Changes
Re: Changes for Exam and Fees Rule Draft

We will need to sign another lease agreement with the Armory because we will not have the outsourcing of the exam completed by July 1st.

XVI. ADJOURNMENT

There being no further business and having completed its duties, the meeting of the Indiana Plumbing Commission adjourned at 11:00 a.m.

William Ciriello – Chairman
Indiana Plumbing Commission

Date

Indiana Plumbing Commission
March 26, 2008

JOURNEYMAN BY APPRENTICESHIP

	Approved	Tabled	Denied
Appieget, Bill	✓		

JOURNEYMAN BY TRADE

	Approved	Tabled	Denied
Brockey, James		✓	
Horn, Jerry	✓		
Skaggs, Andrew	✓		

CONTRACTOR BY APPRENTICESHIP

	Approved	Tabled	Denied

CONTRACTOR BY TRADE

	Approved	Tabled	Denied
Focht, Joshua			
Drinkut, Michael	✓		
Jones, Charles	✓		
Harmon, Ryan	✓		
	✓		

PLUMBING CONTRACTOR BY BUSINESS

	Approved	Tabled	Denied
Baral, Daman	✓	/	/
Huge, Timothy	✓	/	/
Trammell, Jeremy	✓	/	/
Whceler, John	✓	/	/

PLUMBING TEMPORY CONTRACTOR

	Approved	Tabled	Denied
Drinkut, Michael	✓	/	/
Hileman, Bernard III	✓	/	/

PREVIOUSLY PENDING INVESTIGATED JOURNEYMAN OR CONTRACTOR BY TRADE

	Approved	Tabled	Denied
	/	/	/

PLUMBING APPRENTICE

	Approved	Tabled	Denied
	/	/	/



Indiana Plumbing Commission

402 West Washington Street, Room W072
Indianapolis, Indiana 46204
Telephone: (317) 234-3022
Fax: (317) 233-4236
Website: www.pla.IN.gov

Governor Mitchell E. Daniels, Jr

Dale L. Funk
Funk's Plumbing & Heating
6289 E Lynn Drive
Mooresville IN 46158

April 7, 2008

Dear **Dale L. Funk**:

The Indiana Plumbing Commission reviewed your request for reinstatement of licensure and supporting documentation at their recent commission meeting.

The commission has scheduled you for a personal appearance on **Wednesday, May 28, 2008 at 9:45 a.m.** at the Indiana Government Center South, Room W072, Indianapolis, Indiana.

Please bring any pertinent documentation concerning your request for reinstatement such as:

1. Place of employment since expiration of your license.
2. Type of work done since the expiration of your license.
3. Proof of an active plumbing license in another state.
4. Any other information which will show the commission your readiness to practice plumbing safely.

If at any time during this review process you feel that you do not meet the requirements and are not able to provide the necessary documentation, you may withdraw your request for reinstatement. To do so, please submit a letter in writing to our office requesting that your request for reinstatement be withdrawn. If you do not make a personal appearance as requested or submit a request to withdrawal to be received by our office one week before the commission meeting, your request for reinstatement may be denied.

If further information is needed, please feel free to contact our office at (317) 234-3022 or via email at pla10@pla.IN.gov.

Sincerely,

Rebecca Tinsley
Case Manager
State Board of Registration for Professional Engineers

Personal Appearance

5

Expired Plumber Contractor

L.T

Expired Plumbing Renewal Application	DATE EXPIRED	RENEWAL FEE	<p>Please Circle your answer to ALL the following questions: SINCE YOU LAST RENEWED YOUR LICENSE: (if yes to questions 1-3, please attach details of action taken)</p> <p>1. Has any professional license, certificate, registration, or permit you hold or have held been disciplined or are formal charges pending? YES <input type="radio"/> NO <input checked="" type="radio"/></p> <p>2. Have you been denied a license, certificate, registration, or permit in any state? YES <input type="radio"/> NO <input checked="" type="radio"/></p> <p>3. Have you been convicted of or pled guilty to a violation of a federal or state law or are criminal charges pending? YES <input type="radio"/> NO <input checked="" type="radio"/></p> <p>You must sign and date below. By signing this form, you are attesting that the information on this renewal is true and correct and that you have met all required continuing education hours if applicable. This form will be returned if it is not correctly completed which will delay the renewal.</p>
	12/31/2001	**See Below	
	LICENSE NUMBER	CURRENT STATUS	
	PC81052406	Expired	
Dale L. Funk Funk's Plumbing & Heating 6289 E Lynn Drive Mooresville IN 46158			
CONTROL # 812537 CORRECTIONS BELOW MAR 17 2008 AMOUNT PAID 100.00		Signature <i>Dale L Funk</i> Date <i>3/13/08</i>	



Indiana Plumbing Commission

402 West Washington Street, Room W072

Indianapolis, Indiana 46204

Telephone: (317) 234-3022

Fax: (317) 233-5559

Website: www.pla.in.gov

Governor Mitchell E. Daniels, Jr

Dale L. Funk
Funk's Plumbing & Heating
6289 E Lynn Drive
Mooreville IN 46158

March 4, 2008

PC81052406

12/31/2001

Dear Dale L. Funk

This letter is in regards to the status of your plumbing license. Your license to practice plumbing expired December 31, 2001 which is more than three years.

Recently, our office received several inquires from plumbers in your situation wanting to know how to have a lapsed license renewed or reinstated. Upon receipt of these requests, we were prompted to take a close look at the code cites which govern the reinstatement of delinquent licenses. Based upon this review, it was determined that according to IC 25-1-8-6 (d) you are eligible for the reinstatement of your lapsed plumbing license. IC 25-1-8-6 (d) states in pertinent part: Please submit the information before the boards meeting on March 26, 2008.

(d) Notwithstanding any other law regarding the reinstatement of a delinquent or lapsed license, certificate, or registration, unless a statute specifically does not allow a license, certificate, or registration to be reinstated if it has lapsed for more than three (3) years, the holder of a license, certificate, or registration that was issued by the board that is more than three (3) years delinquent must be reinstated upon meeting the following requirements: The application fee is \$50.00. The renewal fee is \$100.00 and the late fee is \$50.00.

- (1) Submission of the holder's completed renewal application.
- (2) Payment of the current renewal fee established by the board under section 2 of this chapter.
- (3) Payment of a reinstatement fee equal to the current initial application fee.
- (4) If a law requires the holder to complete continuing education as a condition of renewal, the holder shall provide the board with a sworn statement, signed by the holder, that the holder has fulfilled the continuing education requirements required by the board for the current renewal period.
- (5) Complete such remediation and additional training as deemed appropriate by the board given the lapse of time involved.
- (6) Any other requirement that is provided for in statute or rule that is not related to fees.

Therefore, although your license has lapsed for more than three years, upon receipt of the above listed your request for reinstatement will be presented to the board for them to determine the appropriate remediation and additional training needed. Please understand that we will not be able to update your license to active status until you have provided all of the above listed and the board has reviewed that information. If you have any questions or need additional information, please do not hesitate to contact our office.

Sincerely,

Rebecca Tinsley
Case Manager
Indiana Plumbing Commission

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2-15-08

To the Indiana Plumbing Commission Board,

In doing some research, I find that my license has lapsed and I would like to have it reinstated. I have had my Contractor's License since March 1975 and would like to continue using it until I retire in a few years.

The post office changed our address a while ago and I suspect renewal notices may have not been delivered after the change. I did make a phone call to the office to alert of the address change, but have not received any renewal notices to the new address.

I apologize for letting so much time go by before checking, I have no excuses, just that life happens and time slips away. My mother passed away and I was in charge of family details. My time was consumed for several years.

I am sure I owe past fees, please let me know the total.

I appreciate your time,

Dale L. Funk

Dale L Funk
Funk's Plumbing & Heating
6289 E Lynn Drive
 Mooresville, IN 46158

PC # 81052406 / Expired 12/31/01

317-831-3946
317-506-4245 cell

RECEIVED

FEB 20 2008

Indiana Professional
Licensing Agency

11



Indiana Plumbing Commission

402 West Washington Street, Room W072
Indianapolis, Indiana 46204
Telephone: (317) 234-3022
Fax: (317) 233-4236
Website: www.pla.IN.gov

Governor Mitchell E. Daniels, Jr

Ricky L. Wardwell
5096 Berwick Lane
Avon IN 46123

April 7, 2008

Dear **Ricky L. Wardwell**:

The Indiana Plumbing Commission reviewed your request for reinstatement of licensure and supporting documentation at their recent commission meeting.

The commission has scheduled you for a personal appearance on **Wednesday, May 28, 2008 at 9:45 a.m.** at the Indiana Government Center South, Room W072, Indianapolis, Indiana.

Please bring any pertinent documentation concerning your request for reinstatement such as:

1. Place of employment since expiration of your license.
2. Type of work done since the expiration of your license.
3. Proof of an active plumbing license in another state.
4. Any other information which will show the commission your readiness to practice plumbing safely.

If at any time during this review process you feel that you do not meet the requirements and are not able to provide the necessary documentation, you may withdraw your request for reinstatement. To do so, please submit a letter in writing to our office requesting that your request for reinstatement be withdrawn. If you do not make a personal appearance as requested or submit a request to withdrawal to be received by our office one week before the commission meeting, your request for reinstatement may be denied.

If further information is needed, please feel free to contact our office at (317) 234-3022 or via email at pla10@pla.IN.gov.

Sincerely,

Sylvia S. Grinstead
Case Manager
State Board of Registration for Professional Engineers

Expired Journeyman Plumber

Expired Plumbing Renewal Application	DATE EXPIRED	RENEWAL FEE	<p>Please Circle your answer to ALL the following questions: SINCE YOU LAST RENEWED YOUR LICENSE: (if yes to questions 1-3, please attach details of action taken)</p> <p>1. Has any professional license, certificate, registration, or permit you hold or have held been disciplined or are formal charges pending? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p> <p>2. Have you been denied a license, certificate, registration, or permit in any state? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p> <p>3. Have you been convicted of or pled guilty to a violation of a federal or state law or are criminal charges pending? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p> <p>You must sign and date below. By signing this form, you are attesting that the information on this renewal is true and correct and that you have met all required continuing education hours if applicable. This form will be returned if it is not correctly completed which will delay the renewal.</p>
	12/31/2001	**See Below	
	LICENSE NUMBER	CURRENT STATUS	
	JP08707127	Expired	
Ricky L. Wardwell 5096 Berwick Lane Avon IN 46123			
<div style="border: 2px solid black; padding: 5px; display: inline-block;"> <p style="font-size: 1.2em; margin: 0;">CONTROL # 812723</p> <p style="font-size: 1.2em; margin: 0;">MAR 18 2008</p> <p style="font-size: 1.2em; margin: 0;">AMOUNT PAID 82.00</p> </div>			
		Signature <u><i>Ricky L. Wardwell</i></u>	
		Date <u>3-18-08</u>	

IN THE MATTER OF THE)
)
LICENSE OF JOSEPH AZAD)
)
LICENSE NO.: JP29400586 (Expired))
(pending plumbing contractor license))
)



NOTICE OF PROPOSED DEFAULT ORDER

An administrative hearing was scheduled for January 23, 2008, at 1:00 p.m., before the Indiana Plumbing Commission ("Commission") in the Gerald H. Quigley Conference Room of the Indiana Professional Licensing Agency, Indiana Government Center South, 402 West Washington Street, Room W072, Indianapolis, Indiana, to determine whether sanctions should be imposed upon Joseph Azad ("Respondent") pursuant to Indiana Code 25-1-11-12.

The State of Indiana was represented by Myron A. Rahn III, Deputy Attorney General. Respondent was not present and was not represented by counsel.

The Commission, after taking official notice of its file in this matter and pursuant to Indiana Code § 4-21.5-3-24, by a unanimous vote, issues a Notice of Proposed Default Order against Respondent on the following grounds:

1. Respondent's address on file with the Commission and last known address is 412 Lincoln Way, Chesterton, Indiana 46304. Respondent has an obligation to keep the Commission informed of his current address.
2. Respondent is licensed as a journeyman plumber with the State of Indiana under license number JP29400586.
3. On November 2, 2007, the Indiana Professional Licensing Agency sent Respondent notice of the date, time, and location of the final hearing scheduled for January 23, 2008.

4. Pursuant to Indiana Code § 4-21.5-3-20, Respondent was provided adequate notice of the final hearing date and failed to appear for the scheduled hearing on January 23, 2008.

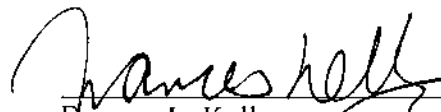
ORDER

For Respondent's failure to appear for his scheduled hearing date, the Commission issues this Notice of Proposed Default.

In accordance with Indiana Code § 4-21.5-3-24, Respondent must file a written motion within ten (10) days of service of this order (seven days plus an additional three days since service of this order shall be by mail) requesting that the Commission not enter a default order in this cause and stating the reasons relied upon for his request. Failure of Respondent to file such a written motion within ten (10) days shall result in the issuance of a default order. If Respondent timely files a motion, the Commission shall consider said motion along with any other relevant facts in determining whether a default order should be entered. Should a default order be entered against Respondent, the Commission may hold further proceedings as it deems appropriate to complete this cause without the participation of Respondent.

SO ORDERED, this 10 day of March, 2008.

INDIANA PLUMBING COMMISSION



Frances L. Kelly
Executive Director
Indiana Professional Licensing Agency

Distribution:

Joseph Azad
412 Lincoln Way
Chesterton, Indiana 46304

CERTIFIED MAIL NO.: 7006 2760 0003 4668 0265
RETURN RECEIPT REQUESTED

Myron A. Rahn III
Deputy Attorney General
Office of the Attorney General
Indiana Government Center South
302 West Washington Street
Indianapolis, IN 46204

BEFORE THE INDIANA
PLUMBING COMMISSION
CAUSE NO. IPC 07-20

IN THE MATTER OF THE
LICENSE OF
JOSEPH AZAD,
LICENSE NO. JP29400586

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HEARING NOTICE

Comes now the Indiana Plumbing Commission (hereinafter "Commission") pursuant to IC 4-21.5-3-20 and issues the following hearing notice:

1. This notice is being provided to Respondent, Joseph Azad, 412 Lincoln Way, Chesterton, IN 46304.
2. This notice is being provided to counsel for the State of Indiana, Amanda Bailor, Deputy Attorney General, Office of the Attorney General, Indiana Government Center South, 302 W. Washington Street, 5th Floor, Indianapolis, IN 46204 telephone no. (317) 232-4834.
3. The official cause number of this action is IPC 07-20.
4. This action is a disciplinary hearing to determine whether or not sanctions should be imposed upon the Respondent's license pursuant to IC 25-1-11-12.
5. A hearing regarding this matter will be held on the 23rd day of January, 2008, at 10:00 o'clock a.m., local time, in Room W072 of the Indiana Professional Licensing Agency, Indiana Government Center South, 402 West Washington Street, Indianapolis, IN 46204, or at such other hearing room designated by the Commission.
6. The Commission is empowered to hold this disciplinary hearing pursuant to the authority of IC 25-1-11 and IC 4-21.5-3.

7. The Commission will be presiding as administrative law judge in this matter. Angela Smith Jones, Commission Director, may be contacted to obtain information concerning hearing schedules and procedures by mail in care of the Indiana Professional Licensing Agency, Indiana Government Center South, 402 W. Washington St., Room W072, Indianapolis, Indiana 46204, by email at pla10@pla.IN.gov, by facsimile at (317) 233-4236 or by telephone at (317) 234-3022.

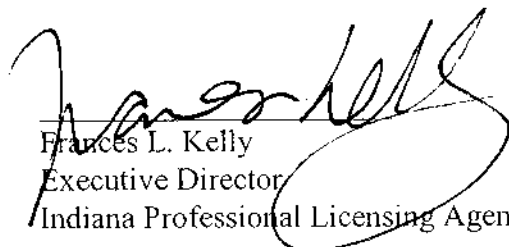
8. The hearing will address the issues contained in the Petitioner's Complaint, which is attached hereto and incorporated herein by reference as Exhibit "A".

9. A party who fails to attend or participate in a prehearing conference, hearing, or other later stage of this proceeding may be held in default or have the proceeding dismissed under section 24 of 4-21.5-3.

10. Pursuant to IC 4-21.5-3-34, this Commission may afford the parties the opportunity to informally settle matters and present such settlements for adoption by the Commission. However, this section does not require any person to settle a matter under this agency's informal procedures.

All of which is ORDERED, ADJUDGED AND DECREED this 02 day of

November, 2007.


Frances L. Kelly
Executive Director
Indiana Professional Licensing Agency

cc:

Joseph Azad
412 Lincoln Way
Chesterton, IN 46304
CERTIFIED MAIL NO.: 7003 3110 0004 5111 7466

Amanda Bailor
Deputy Attorney General
Office of the Attorney General
Indiana Government Center South
302 W. Washington Street, 5th Floor
Indianapolis, IN 46204

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

IPC07-20
Joseph Azad
412 Lincoln Way
Chesterton, IN 46304

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent
Robert Campbell Addressee
- B. Received by Printed Name Date of Delivery
Robert Campbell *11-5-07*
- D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No
*412 Lincoln St.
Penton, IN 46304*

- 3. Service Type
 Certified Mail
 Registered
 Insured Mail
 Express Mail
 Return Receipt for Merchandise
 C.O.D.
 Restricted Delivery? (Extra Fee) Yes

2. Article Number (Transfer from service label) 7003 3110 0004 5111 7466
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit the website at www.usps.com

1402 W. Washington St.
 Room W072
 Indianapolis, IN 46204

Certified Fee: *5.78*

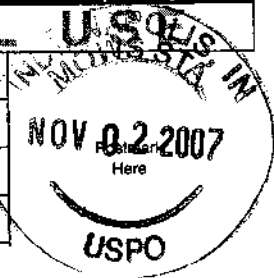
Return Receipt Fee (Endorsement Required)

Restricted Delivery Fee (Endorsement Required)

Total IPC 07-20

Sent To Joseph Azad
 412 Lincoln Way
 Chesterton, IN 46304

PS Form 3800, June 2002 See Reverse for Instructions



9942 TTTS 4000 DTTE E002

IN THE MATTER OF THE
LICENSE OF
JOSEPH AZAD
LICENSE NO: JP29400586

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COMPLAINT

This complaint is brought against the plumbing license of Joseph Azad, ("Respondent"), by the State of Indiana, by counsel, Deputy Attorney General, Amanda Bailor on behalf of the Office of the Attorney General ("Petitioner") and pursuant to Indiana Code 25-1-7-7, Indiana Code 25-1-6-3, Indiana Code 25-28.5 *et seq.*, the Administrative Orders and Procedures Act, Indiana Code 4-21.5-3 *et seq.*, and Indiana Code 25-1-11-1 *et seq.* In support, Petitioner alleges and states:

FACTS

- 1. Respondent's address on file with the Indiana Plumbing Commission ("Commission") is 412 Lincoln Way, Chesterton, Indiana 46304. Respondent is a Journeyman Plumber holding license number JP29400586.
- 2. Respondent's plumbing company, Z Plumbing, LLC, is not licensed in the State of Indiana.
- 3. Respondent's business card reads as follows:

Z Plumbing, LLC
Reliable & Fast
219.689.4147
405 Courtney St.
Valparaiso, IN 46383
Licensed-Bonded-Insured

**Exhibit
B**

20

4. Pursuant to the Secretary of State's website, Respondent is listed as the registered Agent of Z Plumbing, LLC.

5. As of October 26, 2007, neither Respondent nor Z Plumbing, LLC held a plumbing contractor license.

COUNT I

6. Paragraphs 1-5 are repeated and incorporated herein.

7. Respondent's conduct as described above constitutes a violation of Indiana Code 25-1-11-5(a)(1)(C) in that Respondent advertised services or goods in a false or misleading manner by holding Z Plumbing, LLC out to the public as a licensed plumbing contractor when Respondent distributed business cards on which the name of a plumbing corporation appeared along with the assertion that the corporation was licensed. Respondent is the registered Agent for Z Plumbing Corporation. Neither the plumbing corporation nor Respondent, a journeyman plumber unqualified to perform plumbing services without the supervision of a plumbing contractor, hold a plumbing contractor license.

WHEREFORE, Petitioner requests an order against the Respondent, that:

Imposes the appropriate disciplinary sanction;

1. Directs Respondent to immediately pay all of the cost incurred in the prosecution of this case; and

2. Provides any other relief the Board deems just and proper under Ind.

Code 25-1-11-12.

Respectfully submitted,

STEVE CARTER
Attorney General of Indiana

Atty. No.: 4150-64

By: Amanda Bailor
Amanda Bailor
Atty. No.: 26771-29
Deputy Attorney General

Office of the Attorney General
Indiana Government Center South, Fifth Floor
302 W. Washington Street
Indianapolis, Indiana 46204-2770
(317) 232-4834

CERTIFICATE OF SERVICE

I certify that a copy of the foregoing "Complaint" has been served upon the Respondent listed below, by United States mail, first class postage prepaid, on this 29th day of October, 2007:

Joseph Azad
412 Lincoln Way
Chesterton, Indiana 46304

Amanda Bailor
Amanda Bailor

IN THE MATTER OF THE)
)
LICENSE OF)
)
JOSEPH AZAD)
)
LICENSE NO: JP29400586)
)



COMPLAINT

This complaint is brought against the plumbing license of Joseph Azad, (“Respondent”), by the State of Indiana, by counsel, Deputy Attorney General, Amanda Bailor on behalf of the Office of the Attorney General (“Petitioner”) and pursuant to Indiana Code 25-1-7-7, Indiana Code 25-1-6-3, Indiana Code 25-28.5 *et seq.*, the Administrative Orders and Procedures Act, Indiana Code 4-21.5-3 *et seq.*, and Indiana Code 25-1-11-1 *et seq.* In support, Petitioner alleges and states:

FACTS

1. Respondent’s address on file with the Indiana Plumbing Commission (“Commission”) is 412 Lincoln Way, Chesterton, Indiana 46304. Respondent is a Journeyman Plumber holding license number JP29400586.
2. Respondent’s plumbing company, Z Plumbing, LLC, is not licensed in the State of Indiana.
3. Respondent’s business card reads as follows:

Z Plumbing, LLC
Reliable & Fast
219.689.4147
405 Courtney St.
Valparaiso, IN 46383
Licensed-Bonded-Insured

4. Pursuant to the Secretary of State's website, Respondent is listed as the registered Agent of Z Plumbing, LLC.

5. As of October 26, 2007, neither Respondent nor Z Plumbing, LLC held a plumbing contractor license.

COUNT I

6. Paragraphs 1-5 are repeated and incorporated herein.

7. Respondent's conduct as described above constitutes a violation of Indiana Code 25-1-11-5(a)(1)(C) in that Respondent advertised services or goods in a false or misleading manner by holding Z Plumbing, LLC out to the public as a licensed plumbing contractor when Respondent distributed business cards on which the name of a plumbing corporation appeared along with the assertion that the corporation was licensed. Respondent is the registered Agent for Z Plumbing Corporation. Neither the plumbing corporation nor Respondent, a journeyman plumber unqualified to perform plumbing services without the supervision of a plumbing contractor, hold a plumbing contractor license.

WHEREFORE, Petitioner requests an order against the Respondent, that:

Imposes the appropriate disciplinary sanction;

1. Directs Respondent to immediately pay all of the cost incurred in the prosecution of this case; and
2. Provides any other relief the Board deems just and proper under Ind.

Code 25-1-11-12.

Respectfully submitted,

STEVE CARTER
Attorney General of Indiana

Atty. No.: 4150-64

By: Amanda Bail
Amanda Bailor
Atty. No.: 26771-29
Deputy Attorney General

Office of the Attorney General
Indiana Government Center South, Fifth Floor
302 W. Washington Street
Indianapolis, Indiana 46204-2770
(317) 232-4834

CERTIFICATE OF SERVICE

I certify that a copy of the foregoing "Complaint" has been served upon the Respondent listed below, by United States mail, first class postage prepaid, on this 29th day of October, 2007:

Joseph Azad
412 Lincoln Way
Chesterton, Indiana 46304

Amanda Bail
Amanda Bailor

925

Bill Stokes Plumbing, Inc.

499 S. State Road 267
Avon, IN 46123
(317) 839-4860

April 10, 2008

Indiana Plumbing Commission
402 W Washington Street, Room W072
Indianapolis, In 46204

Attn: Rebecca Tinsley

My test scores for the written test was 69. I would like to file a petition for review. Please let me know when I can come in to review my written test. I can be reached at the number listed.

Thank you,
Nathan Bousman
c/o Bill Stokes Plumbing Inc

20

Indiana Professional Licensing Agency

Applicant Examination/Licensing Cover Sheet

Name: Boosman, Nathan

Address: 8462 E State Rd 240

City: Avon State: IN Zip: 46123

Passage of Examination

Type of Examination Date Passed Exam Number

Type of Examination	Date Passed	Exam Number
Journeyman		
Contractor		

Examination Information

Attempt No.	Type of Exam	Exam Date	Exam Number	Grades
1	WCS WC	3-26-08	205	W/F C/F S/P

527



Indiana Plumbing Commission
402 West Washington Street, Room W072
Indianapolis, Indiana 46204
Telephone: (317) 234-3022
Fax: (317) 233-5559
Website: www.pla.IN.gov

Governor Mitchell E. Daniels, Jr

Nathan Bousman
c/o Bill Stokes Plumbing
499 South State Road 267
Avon IN 46123

April 3, 2008

Dear Nathan Bousman

The Indiana Plumbing Commission regrets to inform you that your application for licensure as a journeyman plumber has been denied pursuant to IC 25-28.5-1-15, because you have failed to achieve a passing score on the journeyman plumber examination. Your examination results are as follows:

Date	Type	Candidate#	Score	Results
March 26, 2008	Copper Project	205	18	Fail
March 26, 2008	Soil Project	205	45	Pass
March 26, 2008	Written	205	69	Fail

Please be advised that if you desire administrative review of this application denial, you must file a written petition for review at the above address with the Indiana Plumbing Commission stating the reason for the review. As the petitioner, you would have the burden of proving in an administrative hearing that the decision to deny application was incorrect. If you do not file a petition for review, this action will be final.

If you file a petition for review, it must be filed no later than eighteen (18) days from the above stated date unless such date is a Saturday, Sunday, legal holiday under state statute or day that the Professional Licensing Agency's offices are closed during regular business hours in which case, the deadline would be the first day thereafter that is not a Saturday, Sunday, or legal holiday under state statute or day the Professional Licensing Agency's offices are closed during regular business hours. If you do so, your petition for review will be granted and an administrative law judge of the Indiana Plumbing Commission will conduct an administrative proceeding.

Should you choose to petition for review, you may review your examination following board action granting your petition, upon making an appointment with the board office at (317) 234-3022.

Sincerely,

Rebecca Tinsley
Case Manager

28



Indiana Plumbing Commission
402 West Washington Street, Room W072
Indianapolis, Indiana 46204
Telephone: (317) 234-3022
Fax: (317) 233-5559
Website: www.pla.IN.gov

Governor Mitchell E. Daniels, Jr

Nathan Bousman
c/o Bill Stokes Plumbing
499 South State Road 267
Avon IN 46123

April 3, 2008

Dear Nathan Bousman,

As a result of failing the journeyman plumber examination, you are eligible to retake the failed section(s) of the examination providing you submit this letter to the above address with the applicable examination fee of thirty dollars \$30.00.

Date	Type	Candidate#	Score	Results
March 26, 2008	Copper Project	205	18	Fail
March 26, 2008	Soil Project	205	45	Pass
March 26, 2008	Written	205	69	Fail

Pursuant to 860 IAC, effective October 1, 1992, an individual who does not pass the entire examination in the first attempt shall be entitled to take the examination six (6) additional times.

Upon receipt of the letter and fee you will be scheduled for the next available examination. After seven (7) attempts or two (2) years whichever comes first, your present application will be terminated.

Notices are mailed out at least fifteen (15) working days prior to the date of the examination.

If you have any questions, please contact me at (317) 234-3022. You may visit our website at www.in.gov/pla.

Sincerely,

Rebecca Tinsley

Case Manager

27

INDIANA PLUMBING JOURNEYMAN EXAMINATION SCORE SHEET

EXAMINEE NO: 205
DATE: 3-26-08

EXAMINATION SCORE PER SECTION

WRITTEN	- 100 points	- 70 points to pass	<u>69</u>
COPPER	- 50 points	- 35 points to pass	<u>18</u>
SOIL	- 50 points	- 35 points to pass	<u>45</u>

M.C. WRITTEN - 100 POINTS

UPC	- 60 points	<u>42</u>
STATE	- 10 points	<u>5</u>
DRAWINGS	- 30 points	<u>22</u>
TOTAL		<u>69</u>

COPPER PROJECT - 50 POINTS

Measurements	- 10 points	<u>4</u>
Alignment	- 10 points	<u>8</u>
Preparation	- 10 points	<u>6</u>
Pressure Test	- 20 points	<u>0</u>
TOTAL		<u>18</u>

leak!

Initials _____

SOIL PIPE PROJECT - 50 POINTS

Pressure Tests	- 20 points	<u>17</u>
Number of Leaks	- <u>1</u>	
Alignment	- 5 points	<u>3</u>
Appearance	- 10 points	<u>10</u>
Lead Ring	- 15 points	<u>15</u>
TOTAL		<u>45</u>

Initials _____

Journeyman Checklist by Apprenticeship

- 1. \$30.00 fee ✓
- 2. Section 1 is completed and section 3 is notarized. ✓
- 3. Section 1 must be Approved school. ✓
- 4. Approved sponsor signature. ✓
- 5. Notary seals are affixed. ✓
- 6. Apprenticeship license and Status. (Must be active to schedule) PA 20100692

Reviewer RT, Reviewer 2 SA

Accept or Deny (circle)

Accept



Indiana Plumbing Commission

402 West Washington Street, Room W072

Indianapolis, Indiana 46204

Telephone: (317) 234-3022

Fax: (317) 233-5559

Website: www.pla.IN.gov

Governor Mitchell E. Daniels, Jr

Nathan Bousman
c/o Bill Stokes Plumbing
499 South State Road 267
Avon IN 46123

March 11, 2008

Dear Nathan Bousman:

Please be advised that you have been scheduled for the following Journeyman Plumber examination:

EXAMINATION DATE: March 26, 2008

EXAMINATION SECTIONS: WRITTEN, COPPER, SOIL

TIME: EXAM BEGINS AT 8:00 A.M. Indianapolis Local Time

TEST SITE: NATIONAL GUARD ARMORY
STOUT FIELD
3912 WEST MINNESOTA STREET
INDIANAPOLIS, INDIANA 46241

NO ELECTRONIC OR BATTERY POWERED DEVICES such as: Calculators, palms, cell phones, etc. are to be brought to the examination site.

Enclosed for your information and review are examination instructions, guidelines, directions to the examination site and statute and rules of the commission, are the recommended study material. The UPC National Plumbing Code Book with Indiana revisions may be obtained from the Architects Book Store, 47 S Pennsylvania Street, Indianapolis, IN 46204, (317) 634-3871 or the International Conference Of Building Officials 335 Ridge Point Drive Carmel, In 46032 (800) 243-5736 or (317) 706-1667.

Reference materials will not be permitted during the examination. Examination material and equipment must remain in your vehicle until you are ready to begin the practical examination. Photo identification (Driver's License or Employment I.D) shall be presented at the examination site.

If you have any questions, please contact me at (317) 234-3022, or pla10@pla.state.in.us.

Sincerely,

Case Manager
Rebecca Tinsley

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APPLICATION FOR JOURNEYMAN PLUMBER EXAMINATION FOR LICENSING

State Form 40602 (R10 / 11-02)
Approved by State Board of Accounts, 2002

CONTROL # 811704

402 W. WASHINGTON ST
Rm. W074

PLUMBER
MAR - 5 2008
\$30.00

Indiana Professional Licensing Agency
302 W. Washington St., Rm. 5004
Indianapolis, IN 46204-2700
(317)-232-2980
www.in.gov/pla

FEE: \$30.00

AMOUNT PAID
ALL FEES ARE NON-REFUNDABLE AND NON-TRANSFERABLE.

Soc. _____		* Your Social Security number is requested by this agency in accordance with IC 4-1-8-1; it is mandatory that it be given. Social Security numbers are made available to the Department of Revenue.	
Name of applicant NATHAN BOUSMAN		Date of birth (month, day, year) Dec 27 1976	
Address (number and street, city, state, ZIP code) 8462 E. St. Rd 240		PA 20106692 (08)	
County Hendricks	Telephone number 317-539-2625		
Have you ever been convicted of a crime? (If "Yes", provide a copy of the court order and any pertinent documents)			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

INSTRUCTIONS:

- If you are applying on the basis of having completed four (4) years of training in an approved apprenticeship program, please complete Sections one (1) and three (3).
- If you are applying on the basis of having completed four (4) years of experience in the plumbing trade, please complete Sections two (2) and three (3).

SECTION ONE	
I have successfully completed the following four (4) years of training in an approved apprenticeship program, satisfying the requirements as defined in commission rule, 860 IAC 1-1-9, as verified by the sponsor of the approved apprenticeship program, herein:	
Name of apprenticeship program sponsor MECHANICAL SKILLS, INC	Telephone number 317-352-1189
Address (number and street, city, state, ZIP code, county) 3535 E. MICHIGAN ST INDIANAPOLIS, IN 46201	
Date of enrollment (month, year) 7-99	Date of completion (month, year) 5-04
I hereby certify that NATHAN BOUSMAN successfully completed four (4) years of training in an approved apprenticeship program. <small>Name of apprentice</small>	
Date of enrollment 7-27-99	Signature of manager of approved apprenticeship program sponsor <i>Diane K. Cloud</i>
Date of completion 5-25-04	Date signed 2-26-08

NOTARY CERTIFICATE

STATE OF INDIANA	} SS:
COUNTY OF HAMILTON	
I, DIANE K. CLOUD , having been duly sworn on oath, say that I am the above-named, that I have personally prepared the foregoing affidavit, and that the same is true to the best of my knowledge and belief.	
Signature of manager of approved apprenticeship program sponsor <i>Diane K. Cloud</i>	Signature of Notary Public <i>Paul A. Hallam</i>
Printed or typed name of manager of approved apprenticeship program sponsor DIANE K. CLOUD	Printed or typed name of Notary Public PAUL A. HALLAM
Date subscribed and sworn to Notary Public 2-26-08	County of residence HAMILTON
	Date commission expires 12-12-12

SECTION TWO

I have completed the following four (4) years of experience in the plumbing trade, satisfying the requirements as defined in commission rule, 860 IAC 1-1-9 and 860 IAC 1-1-10, as verified by employer, attached herewith:

Name of employer	Plumbing contractor license number (if applicable): PC
Address (number and street, city, state, ZIP code)	
County	Telephone number
Dates of employment (month, day, year): From _____ To _____	
Name of employer	Plumbing contractor license number (if applicable): PC
Address (number and street, city, state, ZIP code)	
County	Telephone number
Dates of employment (month, day, year): From _____ To _____	

APPLICANT AFFIDAVIT OF EXPERIENCE IN PLUMBING TRADE

I hereby certify that I, _____ have worked in the plumbing trade as defined in commission rule 860 IAC 1-1-9, for the period of _____ to _____, for _____

Name of applicant
Day, month, year Day, month, year Name of company or plumbing business

Name of employer or licensed contractor _____

Address (number and street, city, state, ZIP code) _____

I further certify that I am unable to obtain an employer affidavit verifying the aforementioned experience in the plumbing trade due to the following reason(s):

Signature of applicant _____ Date signed _____

NOTARY CERTIFICATE

STATE OF _____ }
COUNTY OF _____ } SS:

I, _____, having been duly sworn on oath, say that I am the above-named, that I have personally prepared the foregoing affidavit, and that the same is true to the best of my knowledge and belief.

Signature of applicant	Signature of Notary Public
Printed or typed name of applicant	Printed or typed name of Notary Public
Date subscribed and sworn to Notary Public	County of residence Date commission expires

RECEIVED

Indiana Professional Licensing Agency
MAR 0 8 2008

4

I hereby certify that _____ Name of applicant _____ has worked in the plumbing trade as defined in commission rule 860 IAC 1-1-9 for the period of _____ Day, month, year _____ to _____ Day, month, year _____

Signature of employer or licensed plumbing contractor	Name of company or plumbing business	Plumbing contractor license number
Address (number and street, city, state, ZIP code)		Date signed

Licenses who submit false information may be subject to disciplinary action by the Indiana Plumbing Commission.

STATE OF _____

COUNTY OF _____ } SS:

I, _____, having been duly sworn on oath, say that I am the above-named, that I have personally prepared the foregoing affidavit, and that the same is true to the best of my knowledge and belief.

Signature of employer	Signature of Notary Public	
Printed or typed name of employer	Printed or typed name of Notary Public	
Date subscribed and sworn to Notary Public	County of residence	Date commission expires

SECTION 3 (to be completed by all applicants)

STATE OF INDIANA

COUNTY OF MARION } SS:

I, NATHAN BOUSMAN, having been duly sworn on oath, say that I am the above-named applicant, that I have personally prepared the foregoing application, and that the same is true to the best of my knowledge and belief.

Signature of applicant <i>Nathan Bousman</i>	Signature of Notary Public <i>Diane K Cloud</i>	
Printed or typed name of applicant <u>Nathan Bousman</u>	Printed or typed name of Notary Public <u>DIANE K CLOUD</u>	
Date subscribed and sworn to Notary Public <u>2-26-08</u>	County of residence <u>MARION</u>	Date commission expires <u>10-23-09</u>

35



Indiana Plumbing Commission
402 West Washington Street, Room W072
Indianapolis, Indiana 46204
Telephone: (317) 234-3022
Fax: (317) 233-5559
Website: www.pla.IN.gov

Governor Mitchell E. Daniels, Jr

Shane Swinney
2119 Whalen Ave
Indianapolis IN 46227

April 1, 2008

Dear Shane Swinney:

Congratulations! Your score on the Journeyman Plumber examination was sufficient to pass.

Below are your examination grade(s):

Date	Type	Candidate#	Score	Results
September 26, 2007	Copper Project	259	35	Pass
September 26, 2007	Soil Project	259	41	Pass
March 26, 2008	Written	231	74	Pass

Please return this letter with the licensure fee as indicated below.

If paying from **October 1, 2007** thru **December 31, 2008** the fees are: \$60 (includes \$30 license fee and \$30 recovery fund surcharge.)

If paying from January 1, 2009 thru September 30, 2009 the fees are : \$45 (includes \$15 license fee and \$30 recovery fund surcharge.)

Indicate any name change and/or address changes below and return this letter along with the required license fee. Change of name requires copies of proof of legal name change documentation. If you have any questions, please contact us at (317) 234-3022, or pla10@pla.state.in.us.

NAME _____

ADDRESS _____

CITY, STATE ZIP _____

TELEPHONE NUMBER _____

Lorrie Ruble
Case Manager
Indiana Plumbing Commission

20



Indiana Plumbing Commission
 500 West Washington Street, Room W072
 Indianapolis, Indiana 46204
 Telephone: (317) 234-3022
 Fax: (317) 233-5559
 Website: www.pla.IN.gov

Governor Mitchell E. Daniels, Jr

Shane Swinney
 2119 Whalen Ave
 Indianapolis IN 46227

January 3, 2008

Dear Shane Swinney

The Indiana Plumbing Commission regrets to inform you that your application for licensure as a journeyman plumber has been denied pursuant to IC 25-28.5-1-15, because you have failed to achieve a passing score on the journeyman plumber examination. Your examination results are as follows:

Date	Type	Candidate#	Score	Results
December 19, 2007	Written	250	68	Fail

Please be advised that if you desire administrative review of this application denial, you must file a written petition for review at the above address with the Indiana Plumbing Commission stating the reason for the review. As the petitioner, you would have the burden of proving in an administrative hearing that the decision to deny application was incorrect. If you do not file a petition for review, this action will be final.

If you file a petition for review, it must be filed no later than eighteen (18) days from the above stated date unless such date is a Saturday, Sunday, legal holiday under state statute or day that the Professional Licensing Agency's offices are closed during regular business hours in which case, the deadline would be the first day thereafter that is not a Saturday, Sunday, or legal holiday under state statute or day the Professional Licensing Agency's offices are closed during regular business hours. If you do so, your petition for review will be granted and an administrative law judge of the Indiana Plumbing Commission will conduct an administrative proceeding.

Should you choose to petition for review, you may review your examination following board action granting your petition, upon making an appointment with the board office at (317) 234-3022.

Sincerely,

Lorrie Ruble
 Case Manager

Exhibit
 A

37

Shane Swinney
2119 Whalen Avenue
Indianapolis, IN 46227

January 9, 2008

Indiana Plumbing Commission
402 West Washington Street, Room W072
Indianapolis, IN 46204
Attn: Lorrie Ruble

Dear Mrs. Ruble:

Due to knowing that at least one question listed within the written portion of the journeyman plumber examination did not list the correct answer within the multiple choice selection, I would like to petition my results and arrange for an administrative proceeding.

Sincerely,

Shane Swinney

Exhibit
B

38

FILED

MAY 09 2008

Indiana Professional
Licensing Agency

I would like to withdraw my petition

R. P. Child

IPC08-01



Indiana Plumbing Commission
402 West Washington Street, Room W072
Indianapolis, Indiana 46204
Telephone: (317) 234-3022
Fax: (317) 233-5559
Website: www.pla.IN.gov

Governor Mitchell E. Daniels, Jr

Howard P. Cahill
3041 Cleavland Bldg #27
Louisville KY 40206

Dear Howard P. Cahill

March 6, 2008

The Indiana Plumbing Commission regrets to inform you that your application for licensure as a plumbing contractor has been denied pursuant to IC 25-28.5-1-15, because you have failed to achieve a passing score on the plumbing contractor examination. Your examination results are as follows:

Date	Type	Candidate#	Score	Results
February 27, 2008	Copper Project	106	36	Pass
February 27, 2008	Soil Project	106	22	Fail
February 27, 2008	Written	106	47	Fail
February 27, 2008	Drawing	106	86	Pass

Please be advised that if you desire administrative review of this application denial, you must file a written petition for review at the above address with the Indiana Plumbing Commission stating the reason for the review. As the petitioner, you would have the burden of proving in an administrative hearing that the decision to deny application was incorrect. If you do not file a petition for review, this action will be final.

If you file a petition for review, it must be filed no later than eighteen (18) days from the above stated date unless such date is a Saturday, Sunday, legal holiday under state statute or day that the Professional Licensing Agency's offices are closed during regular business hours in which case, the deadline would be the first day thereafter that is not a Saturday, Sunday, or legal holiday under state statute or day the Professional Licensing Agency's offices are closed during regular business hours. If you do so, your petition for review will be granted and an administrative law judge of the Indiana Plumbing Commission will conduct an administrative proceeding.

Should you choose to petition for review, you may review your examination following board action granting your petition, upon making an appointment with the board office at (317) 234-3022.

Sincerely,

Lorrie Ruble
Case Manager

Exhibit
A

440

Ruble, Lorrie

From: cahillpt@aol.com
Sent: Monday, March 17, 2008 2:27 PM
To: Ruble, Lorrie
Subject: TEST REVIEW.

March 17,08

from: Howard Cahill
3041 Cleavland Blvd #27
Lou. KY 40206

To: Ind. Professional Licensing Agency
402 Washington Street W072
Indianapolis IN. 46204

Attn: Lorrie Ruble.

Ms. Ruble I would like to review the my test results from the test given on Feb 27,08. If you could let met know if this is possible please let me know,You may contact me at the above e-mail address or call me at (502) 639-8390.

Thank You for your time.

H.P.Cahill

Supercharge your AIM. Get the [AIM toolbar](#) for your browser.

Exhibit
B

41

L.G. PLUMBING, INC.

**56978 CEDAR RD.
Osceola, IN. 46561
574/256-0677
574/255-5438**

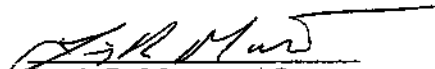


Indiana Plumbing Commission
Attn. Angela Smith Jones
402 West Washington Street, Rm W072
Indianapolis, In 46204

March 28, 2008

Monthly Report:

- L.G. Plumbing, Inc. does not have any Employees at this time.


Lewis R. Marcotte / Owner

RECEIVED

MAR 31 2008

Indiana Professional
Licensing Agency

42

L.G. PLUMBING, INC.

**56978 CEDAR RD.
Osceola, IN. 46561
574/256-0677
574/255-5438**



Indiana Plumbing Commission
Attn. Angela Smith Jones
402 West Washington Street, Rm W072
Indianapolis, In 46204

April 28, 2008

Monthly Report:

- L.G. Plumbing, Inc. does not have any Employees at this time.


Lewis R. Marcotte / Owner

RECEIVED

APR 30 2008

Indiana Professional
Licensing Agency

Expired Journeyman Plumber *RIT*

Expired Plumbing Renewal Application	DATE EXPIRED	RENEWAL FEE	<p>Please Circle your answer to ALL the following questions: SINCE YOU LAST RENEWED YOUR LICENSE: (if yes to questions 1-3, please attach details of action taken)</p> <p>1. Has any professional license, certificate, registration, or permit you hold or have held been disciplined or are formal charges pending? YES <input type="radio"/> NO <input checked="" type="radio"/></p> <p>2. Have you been denied a license, certificate, registration, or permit in any state? YES <input type="radio"/> NO <input checked="" type="radio"/></p> <p>3. Have you been convicted of or pled guilty to a violation of a federal or state law or are criminal charges pending? YES <input type="radio"/> NO <input checked="" type="radio"/></p> <p>You must sign and date below. By signing this form, you are attesting that the information on this renewal is true and correct and that you have met all required continuing education hours if applicable. This form will be returned if it is not correctly completed which will delay the renewal.</p> <p><i>Gil Ruhl</i> <i>4/2/08</i></p> <p>Signature Date</p>
	12/31/2003	**See Below	
	LICENSE NUMBER	CURRENT STATUS	
	JP02079625	Expired	
	Gilbert A. Ruhl 5736 Sprindale Road Cincinnati OH 45247 ENTER HOME ADDRESS CORRECTIONS BELOW # <i>814383</i> <div style="border: 1px solid black; padding: 5px; display: inline-block;">APR - 8 2008</div>		
AMOUNT PAID <i>110.00</i>			

Remove at perforation

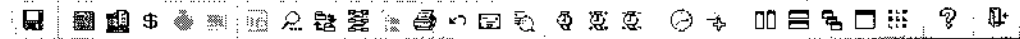
Remove at perforation



Licensee - Gilbert A. Ruehl (Plumbing Commission)

General	Licenses	Education	Employment	Public Info	Supp. Info.
Name		First		Last	
SSN:		All SSN? <input type="checkbox"/>		Gender: Male	
Hold/Alert:		Age:		Date Of Birth: 00/00/0000	
Place of Birth:		Date of Death: 00/00/0000		Aliases	
Address		Additional		Addresses	
5736 Sprindale Road		Cincinnati OH 45247		Remarks	
United States		Hamilton		Other Phones	
Phone: () -		Unlisted? <input type="checkbox"/>			
Other: () -		Unlisted? <input type="checkbox"/>			
Email:					

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Licensee - Gilbert A Renewal (Plumbing Commission)

License #	Type	Status	Probation?	Limited?
JFD2079825	Journeyman Plumber	Expired	<input type="checkbox"/>	<input type="checkbox"/>

Address	Issue Date: 01/01/1900	Applicant Number: 264259
Detail	Obtained By: Examination	
Supp. Info.	From State/Prov:	From Country:
Additional	Expiration Date: 12/31/2003	
	Date This Status: 10/21/2005	Last Renewal Date: 11/20/2001
	Renewal ID:	
	Reason Changed: Terminated	
	Date Archived:	
	Effective Date: 01/01/1900	
	Last Reprint Date:	
	Reprint Count: 0	

Remarks

46

License 2000 Information Technology

Hold/Alert for Gilbert A. Rueht

Type: Alert Reason: zRenewal Checklist Incomplete
Date Placed: 03/31/2008

Place Hold On
 Person Profession/License

Remarks:

Rich text editor toolbar: Bold, Italic, Underline, Text Color, Background Color, Bulleted List, Numbered List, Indent, Outdent, Undo, Redo, Print, Help.

Past the renewal period for the licence has to pay \$80.00 plus the \$30.00 application fee spoke with the sec. and renewal fee.

OK Cancel Help Close

Ready start 2 Sybase Inc... Outlook - Microso... Indiana Youth... 2:25 PM

\$150.00

Expired Plumber Contractor

Architect or Landscape Architect Renewal Application	DATE EXPIRED	RENEWAL FEE	<p>Please Circle your answer to ALL the following questions: SINCE YOU LAST RENEWED YOUR LICENSE: (if yes to questions 1-3, please attach details of action taken)</p> <p>1. Has any professional license, certificate, registration, or permit you hold or have held been disciplined or are formal charges pending? YES <input type="radio"/> NO <input checked="" type="radio"/></p> <p>2. Have you been denied a license, certificate, registration, or permit in any state? YES <input type="radio"/> NO <input checked="" type="radio"/></p> <p>3. Have you been convicted of or pled guilty to a violation of a federal or state law or are criminal charges pending? YES <input type="radio"/> NO <input checked="" type="radio"/></p> <p>AMOUNT PAID \$150.00</p> <p>You must sign and date below. By signing below, you are attesting that the information on this renewal is true and correct and that you have met all required continuing education hours if applicable. This form will be returned if it is not correctly completed which will delay the renewal.</p>
	12/31/2001	**See Below	
	LICENSE NUMBER	CURRENT STATUS	
	PC10000010	Expired	
Robert Coulter 6900 Ferstel Rd Newburgh IN 47630	150.00 + 50 = 200.00 Rd = 200.00 Owed \$150.00		
<p>7222 OAKbwn Dr Newburgh, IN 47630</p>		<p>CONTROL # 820849</p> <p>MAY 14 2008</p> <p>Signature: <i>Robert Coulter</i></p> <p>Date: 4-25-08</p>	

Remove at perforation

Remove at perforation

Remove at perforation

License #	Type	Status	Probation?	Limited?
<not issued>	Plumber Contractor	Abandoned Application	<input type="checkbox"/>	<input type="checkbox"/>
<not issued>	Plumber Contractor	Application Denied	<input type="checkbox"/>	<input type="checkbox"/>
PA29500309	Plumbing Apprentice	Expired Non-Renewab	<input type="checkbox"/>	<input type="checkbox"/>
JP29600224	Journeyman Plumber	Expired Non-Renewab	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Address	Issue Date: 06/07/1996	Applicant Number: 264582
Detail	Obtained By: Examination	MyLicense Number: 17118215
Supp. Info.	From State:Prev:	From Country:
Additional	Expiration Date: 12/31/2001	Last Renewal Date: 02/01/2000
	Date This Status: 12/31/2003	Renewal ID:
	Reason Changed: Terminated	
	Date Archived:	
	Effective Date: 06/07/1996	
	Last Reprint Date:	
	Reprint Count: 0	
Remarks		

General | Licenses | Education | Employment | Public Info | Supp. Info.

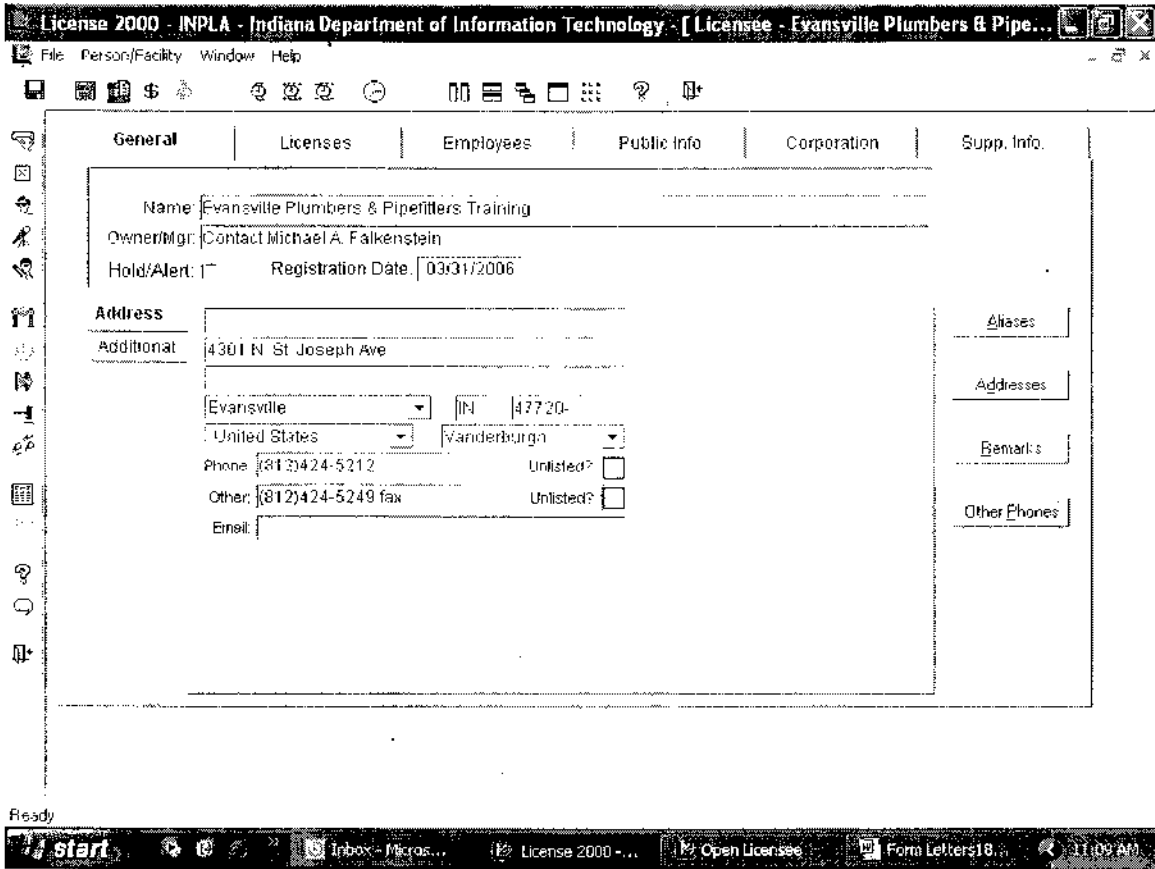
Schooling

School	Enrolled	Graduated	Degree/Certificate	New
				<input type="button" value="New"/> <input type="button" value="Edit"/> <input type="button" value="Delete"/> <input type="button" value="His/Credits"/>

Exams

Exam Type	Text	Exam Date	Expiration	Candidate #	State	Score	Result	Ex	New
Written		07/12/2006		108C	IN	46	Fail		<input type="button" value="New"/> <input type="button" value="Edit"/>
Drawing		09/13/2006		108C	IN	75	Pass		<input type="button" value="Delete"/>
Written		09/13/2006		108C	IN	51	Fail		<input type="button" value="Battery Score"/>
Written		11/08/2006		108C	IL		No Show		<input type="button" value="Merge"/>
Drawing		11/08/2006		108C	IN		No Show		
Written		01/31/2007		105C	IN	53	Fail		

50



Bill
Cuello

Two school
is held at ~~the~~
here I am pretty sure. ?
Tome

Indiana Professional Licensing Agency

Applicant Examination/Licensing Cover Sheet

Name: Robert Coulter

Address: 6900 Ferstel Rd

City: Newburgh State: In Zip: 47630

Passage of Examination

Type of Examination Date Passed Exam Number

Journeyman		
Contractor		

Examination Information

Attempt No.	Type of Exam	Exam Date	Exam Number	Grades
1	WCDS S	2/27/08	107	W/P C/P D/P S/F

S



Indiana Plumbing Commission
402 West Washington Street, Room W072
Indianapolis, Indiana 46204
Telephone: (317) 234-3022
Fax: (317) 233-5559
Website: www.pla.IN.gov

Governor Mitchell E. Daniels, Jr

Robert Coulter
6900 Ferstel Rd
Newburgh IN 47630

Dear Robert Coulter

March 6, 2008

The Indiana Plumbing Commission regrets to inform you that your application for licensure as a plumbing contractor has been denied pursuant to IC 25-28.5-1-15, because you have failed to achieve a passing score on the plumbing contractor examination. Your examination results are as follows:

Date	Type	Candidate#	Score	Results
February 27, 2008	Copper Project	107	38	Pass
February 27, 2008	Soil Project	107	31	Fail
February 27, 2008	Written	107	58	Pass
February 27, 2008	Drawing	107	83	Pass

Please be advised that if you desire administrative review of this application denial, you must file a written petition for review at the above address with the Indiana Plumbing Commission stating the reason for the review. As the petitioner, you would have the burden of proving in an administrative hearing that the decision to deny application was incorrect. If you do not file a petition for review, this action will be final.

If you file a petition for review, it must be filed no later than eighteen (18) days from the above stated date unless such date is a Saturday, Sunday, legal holiday under state statute or day that the Professional Licensing Agency's offices are closed during regular business hours in which case, the deadline would be the first day thereafter that is not a Saturday, Sunday, or legal holiday under state statute or day the Professional Licensing Agency's offices are closed during regular business hours. If you do so, your petition for review will be granted and an administrative law judge of the Indiana Plumbing Commission will conduct an administrative proceeding.

Should you choose to petition for review, you may review your examination following board action granting your petition, upon making an appointment with the board office at (317) 234-3022.

Sincerely,

Lorrie Ruble
Case Manager

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Indiana Plumbing Commission

402 West Washington Street, Room W072
Indianapolis, Indiana 46204
Telephone: (317) 234-3022
Fax: (317) 233-5559
Website: www.pla.in.gov

Governor Mitchell E. Daniels, Jr

March 6, 2008

Robert Coulter
6900 Ferstel Rd
Newburgh IN 47630

Dear Robert Coulter,

As a result of failing the plumbing contractor examination, you are eligible to retake the failed section(s) of the examination providing you submit this letter to the above address with the applicable examination fee of fifty dollars \$50.00.

Date	Type	Candidate#	Score	Results
February 27, 2008	Copper Project	107	38	Pass
February 27, 2008	Soil Project	107	31	Fail
February 27, 2008	Written	107	58	Pass
February 27, 2008	Drawing	107	83	Pass

Pursuant to 860 IAC, effective October 1, 1992, an individual who does not pass the entire examination in the first attempt shall be entitled to take the examination six (6) additional times.

Upon receipt of the letter and fee you will be scheduled for the next available examination. After seven (7) attempts or two (2) years whichever comes first, your present application will be terminated.

Notices are mailed out at least fifteen (15) working days prior to the date of the examination.

If you have any questions, please contact me at (317) 234-3022. You may visit our website at www.in.gov/pla.

Sincerely,

Lorrie Ruble
Case Manager

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INDIANA PLUMBING CONTRACTOR EXAMINATION SCORE SHEET

EXAMINEE NO: 107C
 DATE: 2-27-08

EXAMINATION SCORE PER SECTION

M.C. WRITTEN	- 80 points	- 56 points to pass	<u>58</u>
DRAWING		- 70 % to pass	<u>53</u>
COPPER	- 50 points	- 35 points to pass	<u>29</u>
SOIL	- 50 points	- 35 points to pass	<u>31</u>

M.C. WRITTEN (80 POINTS)

UPC	- 60 questions	<u>45</u>
STATE	- 20 questions	<u>13</u>
TOTAL		<u>58</u>

COPPER PROJECT - 50 POINTS

Measurements	- 10 points	<u>10</u>
Alignment	- 10 points	<u>9</u>
Preparation	- 10 points	<u>9</u>
Pressure Test	- 20 points	<u>20</u>
TOTAL		<u>38</u>

Initials _____

SOIL PIPE PROJECT - 50 POINTS

Pressure Test	- 20 Points	<u>17</u>
Number of Leaks	<u>1</u>	
Alignment	- 5 points	<u>4</u>
Appearance	- 10 points	<u>7</u>
Lead Ring	- 15 points	<u>3</u>
TOTAL		<u>31</u>

Initials _____

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Indiana Plumbing Commission
402 West Washington Street, Room W072
Indianapolis, Indiana 46204
Telephone: (317) 234-3022
Fax: (317) 233-5559
Website: www.pla.IN.gov

Governor Mitchell E. Daniels, Jr

Robert Coulter
6900 Ferstel Rd
Newburgh IN 47630

January 29, 2008

Dear Robert Coulter:

Please be advised that you have been scheduled for the following Plumbing Contractor examination:

EXAMINATION DATE: February 27, 2008
EXAMINATION SECTIONS: WRITTEN, COPPER, SOIL, DRAWING
TIME: EXAM BEGINS AT 8:00 A.M. Indianapolis Local Time
TEST SITE: NATIONAL GUARD ARMORY
STOUT FIELD
3912 WEST MINNESOTA STREET
INDIANAPOLIS, INDIANA 46241

NO ELECTRONIC OR BATTERY POWERED such as: Calculators, palms, cell phones, etc. are to be brought to the examination site.

Enclosed for your information and review are examination instructions, guidelines, directions to the examination site and statute and rules of the commission, are the recommended study material. The UPC National Plumbing Code Book with Indiana revisions may be obtained from the Architects Book Store, 47 S Pennsylvania Street, Indianapolis, IN 46204, (317) 634-3871 or the International Conference Of Building Officials 335 Ridge Point Drive Carmel, In 46032 (800) 243-5736 or (317) 706-1667.

Reference materials will not be permitted during the examination. Examination material and equipment must remain in your vehicle until you are ready to begin the practical examination. Photo identification (Driver's License or Employment I.D) shall be presented at the examination site.

If you have any questions, please contact me at (317) 234-3022, or pla10@pla.state.in.us.

Sincerely,

Lorrie Ruble
Case Manager
Enclosures

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APPLICATION FOR PLUMBING CONTRACTOR EXAMINATION FOR LICENSING

State Form 22806 (R10 / 11-02)
Approved by State Board of Accounts, 2002

CONTROL # 780749
AUG 20 2007
PAID \$500

Indiana Professional Licensing Agency
302 W. Washington St., Rm. E034
Indianapolis, IN 46204-2700
(317)-232-2980
www.in.gov/pla

FEE: \$50.00

ALL FEES ARE NON-REFUNDABLE AND NON-TRANSFERABLE.

Name of applicant Robert Coulter		Date of birth (month, day, year) 7-23-65
Address (number and street, city, state, ZIP code) 6900 Ferstel Rd Newburgh IN 47630		
County Warrick	Telephone number 812-459-7614	
Have you ever been convicted of a crime? (if "Yes", provide a copy of the court order and any pertinent documents) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

INSTRUCTIONS:

- If you are applying on the basis of having completed four (4) years of training in an approved apprenticeship program, please complete Sections one (1) and four (4).
- If you are applying on the basis of having completed four (4) years of experience in the plumbing trade, please complete Sections two (2) and (4).
- If you are applying on the basis of having worked in the plumbing business under the direction of a licensed plumbing contractor for at least four (4) years, please complete Sections three (3) and four (4).

SECTION ONE

I have successfully completed the following four (4) years of training in an approved apprenticeship program, satisfying the requirements as defined in commission rule, 860 IAC 1-1-9, as verified by the sponsor of the approved apprenticeship program, herein:

Name of apprenticeship program sponsor Bayer's Plumbing	Telephone number 812-853-2305
Address (number and street, city, state, ZIP code, county) Bell Oaks Dr Newburgh IN 47630 Warrick	
Date of enrollment (month, year) Dec 1991	Date of completion (month, year) Dec 1995

APPROVED APPRENTICESHIP PROGRAM SPONSOR CERTIFICATION OF COMPLETION

I hereby certify that Robert Coulter successfully completed four (4) years of training in an approved apprenticeship program.

Date of enrollment Dec 1991	Signature of manager of approved apprenticeship program sponsor x Bayer's Plumbing
Date of completion Dec 1995	Date signed 5-24-07

NOTARY CERTIFICATE (completed by program sponsor)

STATE OF Indiana
COUNTY OF Warrick } SS:

I, Michael Bayer, having been duly sworn on oath, say that I am the above-named, that I have personally prepared the foregoing affidavit, and that the same is true to the best of my knowledge and belief.

Signature of manager of approved apprenticeship program sponsor x Michael A Bayer	Signature of Notary Public Jeffrey A. Stuckwisch
Printed or typed name of manager of approved apprenticeship program sponsor Michael A Bayer	Printed or typed name of Notary Public Jeffrey A. Stuckwisch
Date subscribed and sworn to Notary Public 5-24-07	County of residence Vanderburgh
	Date commission expires 3-28-2013

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SECTION TWO

I have completed the following four (4) years of experience in the plumbing trade, satisfying the requirements as defined in commission rule, 860 IAC 1-1-9 and 860 IAC 1-1-10, as verified by employer, attached herewith:

Name of employer	Plumbing contractor license number (if applicable): PC
------------------	---

Address (number and street, city, state, ZIP code)

County	Telephone number
--------	------------------

Dates of employment (month, day, year):
From _____ To _____

Name of employer	Plumbing contractor license number (if applicable): PC
------------------	---

Address (number and street, city, state, ZIP code)

County	Telephone number
--------	------------------

Dates of employment (month, day, year):
From _____ To _____

APPLICANT AFFIDAVIT OF EXPERIENCE IN PLUMBING TRADE

I hereby certify that I, _____ have worked in the plumbing trade as defined in commission rule 860 IAC 1-1-9, for the
Name of applicant
 period of _____ to _____, for _____
Day, month, year Day, month, year Name of company or plumbing business

Name of employer or licensed plumbing contractor

Address (number and street, city, state, Zip code)

I further certify that I am unable to obtain an employer affidavit verifying the aforementioned experience in the plumbing trade due to the following reason(s):

Signature of applicant	Date signed
------------------------	-------------

NOTARY CERTIFICATE (completed by applicant)

STATE OF _____ }
 COUNTY OF _____ } SS:
 I, _____, having been duly sworn on oath, say that I am the above-named, that I have personally prepared the foregoing affidavit, and that the same is true to the best of my knowledge and belief.

Signature of applicant	Signature of Notary Public
------------------------	----------------------------

Printed or typed name of applicant	Printed or typed name of Notary Public
------------------------------------	--

Date subscribed and sworn to Notary Public	County of residence	Date commission expires
--	---------------------	-------------------------

EMPLOYER AFFIDAVIT OF EXPERIENCE IN PLUMBING TRADE

I hereby certify that _____ has worked in the plumbing trade as defined in commission rule 860 IAC 1-1-9 for the
Name of applicant
 period of _____ to _____
Day, month, year Day, month, year

Signature of employer or licensed plumbing contractor	Name of company or plumbing business	Plumbing contractor license number
---	--------------------------------------	------------------------------------

Address (number and street, city, state, ZIP code) _____ Date signed _____

Licensees who submit false information may be subject to disciplinary action by the Indiana Plumbing Commission.

STATE OF _____
 COUNTY OF _____ } SS:

I, _____, having been duly sworn on oath, say that I am the above-named, that I have personally prepared the foregoing affidavit, and that the same is true to the best of my knowledge and belief.

Signature of employer or licensed plumbing contractor		Signature of Notary Public	
Printed or typed name of employer or licensed plumbing contractor		Printed or typed name of Notary Public	
Date subscribed and sworn to Notary Public	County of residence	Date commission expires	

SECTION THREE

I have worked in the following plumbing business(es) under the direction of licensed plumbing contractor(s) for at least four (4) years, satisfying the requirements as defined in commission rule, 860 IAC 1-1-9 and 860 IAC 1-1-10; as verified by licensed contractor(s).

Name of licensed plumbing contractor		License number: PC	
Address (number and street, city, state, ZIP code)			
County		Telephone number	
Dates of employment (month, day, year): From _____ To _____			
Name of licensed plumbing contractor		License number: PC	
Address (number and street, city, state, ZIP code)			
County		Telephone number	
Dates of employment (month, day, year): From _____ To _____			

APPLICANT AFFIDAVIT OF EXPERIENCE IN PLUMBING BUSINESS

I hereby certify that I, _____ Name of applicant _____ have worked in the _____ Name of plumbing business _____, under the direction of _____ Name of licensed plumbing contractor _____, from _____ Address _____ to _____ Day, month, year _____ Day, month, year _____

I further certify that I am unable to obtain an employer affidavit verifying the aforementioned work in a plumbing business under the direction of a licensed plumbing contractor due to the following reason(s):

Signature of applicant	Date signed
------------------------	-------------

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NOTARY CERTIFICATE (completed by applicant)

STATE OF _____ }
 COUNTY OF _____ } SS:

I, _____, having been duly sworn on oath, say that I am the above-named, that I have personally prepared the foregoing affidavit, and that the same is true to the best of my knowledge and belief.

Signature of applicant	Signature of Notary Public	
Printed or typed name of applicant	Printed or typed name of Notary Public	
Date subscribed and sworn to Notary Public	County of residence	Date commission expires

EMPLOYER AFFIDAVIT OF EXPERIENCE IN PLUMBING BUSINESS

I hereby certify that _____ has worked in the _____
Name of applicant Name of plumbing business
 _____, from _____ to _____ under the direction of
Address Day and month Day and month
 _____, plumbing contractor license number _____, said license expiring _____
Name of licensed plumbing contractor

Signature of licensed plumbing contractor	Date signed
---	-------------

Licensees who submit false information may be subject to disciplinary action by the Indiana Plumbing Commission.

NOTARY CERTIFICATE (completed by plumbing contractor)

STATE OF _____ }
 COUNTY OF _____ } SS:

I, _____, having been duly sworn on oath, say that I am the above-named, that I have personally prepared the foregoing affidavit, and that the same is true to the best of my knowledge and belief.

Signature of licensed plumbing contractor	Signature of Notary Public	
Printed or typed name of licensed plumbing contractor	Printed or typed name of Notary Public	
Date subscribed and sworn to Notary Public	County of residence	Date commission expires

SECTION FOUR (to be completed by all applicants)

NOTARY CERTIFICATE

STATE OF Indiana }
 COUNTY OF Warrick County } SS:

I, Robert Coulter, having been duly sworn on oath, say that I am the above-named applicant, that I have personally prepared the foregoing application, and that the same is true to the best of my knowledge and belief.

Signature of applicant <i>Robert C Coulter</i>	Signature of Notary Public <i>Jeffrey A. Stuckwisch</i>	
Printed or typed name of applicant <u>Robert C Coulter</u>	Printed or typed name of Notary Public <u>Jeffrey A. Stuckwisch</u>	
Date subscribed and sworn to Notary Public <u>5-24-07</u>	County of residence <u>Vanderburgh</u>	Date commission expires <u>3-28-2013</u>

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~~JOURNEYMAN~~ CONTRACTOR

APPLICATION CHECKLIST

APPLICANT NAME:

Robert Coulter

IC 25-28.5-1-13

\$30 FEE

AT LEAST 18 YEARS OF AGE

APPRENTICE LICENSE #

JP 29600221

EXPIRATION DATE

12/31/06

Jan 12/31/03

JOURNEYMAN LICENSE #

PC 10200010

EXPIRATION DATE

12/31/01

APPLYING WITH TRAINING OR EXPERIENCE, CHOOSE ONE:

4 YEARS OF TRAINING IN AN APPROVED APPRENTICESHIP PROGRAM (SECTIONS 1 AND 3)

* IS PROGRAM APPROVED?

YES

NO

* SIGNATURE OF MANAGER/SPONSOR?

YES

NO

* NUMBER OF YEARS COMPLETED

* SECTION ONE AND APPLICATION NOTARIZED

YES

NO

4 YEARS EXPERIENCE IN PLUMBING TRADE (SECTIONS 2 AND 3)

* ALL EXPERIENCE UNDER LICENSED PLUMBING CONTRACTOR(S)?

YES

NO

* CORPORATE PLUMBING CONTRACTOR LICENSE #

EXPIRES:

* PLUMBING CONTRACTOR LICENSE #

EXPIRES:

* SECTION TWO AND APPLICATION NOTARIZED

YES

NO

LENGTH OF EMPLOYMENT:

EMPLOYER AFFIDAVITS:

APPLICATION AFFIDAVITS

YES

YES

NO

NO

* EXPERIENCE TOTALS AT LEAST 4 YEARS?

YES

NO

HAS A CONVICTION RECORD

DOCUMENTATION ATTACHED

DOCUMENTATION REQUESTED

APPLICATION COMPLETE

APPLICATION NOTARIZED

ADDITIONAL SUPPORTING DOCUMENTATION

COMMISSION ACTION SECTION

APPROVED

TABLED, PENDING RECEIPT OF THE FOLLOWING:

DENIED

REASON FOR DENIAL:

STATUTE IC

RULE 860 IAC

2-1-1

COMMENTS:

Have not completed a Commission approved BAT program and does not have a current apprenticeship license.

COMMISSION SIGNATURE

Emil

DATE

1-23-08

COMMISSION SIGNATURE

DATE

6/1

RECORD CARD

Date 1-16-92 Age _____
 Name COULTER, ROBERT C. Phone 963-3070
 Address 5209 PLEASANT RIDGE CT Zip 47711
 City EVANSVILLE State IN
 Employer _____
 Occupation _____ Fee _____
 Course WELDING ARC Time 6:30-9:30

Date	Hrs.	Test	Date	Hrs.	Test	Date	Hrs.	Test
1/16	3		2/27	3				
1/23	3		3/5	3				
1/30	4		3/12	3				
2/6	3		3/19	3	Weld			
2/13	3		3/26	3				
2/20			4/9	3				
			4/16	3	89			

Instructor BOCKHORST

RECORD CARD

Date 1-14-92 Age _____
 Name COULTER, ROBERT C. Phone 963-3070
 Address 5209 PLEASANT RIDGE Zip 47711
 City EVANSVILLE State IN
 Employer WMB
 Occupation _____ Fee _____
 Course MATH REFRESHER Time 6:30-9:30

Date	Hrs.	Test	Date	Hrs.	Test	Date	Hrs.	Test
1/14	3	2	2/25	3	24/27			
1/21	3	2	3/3	3	13/14			
1/28	3	24/30	3/10	3	1/11			
2/4	3	25/28	3/17	3	2/25			
2/11	3	49/48	3/24	3	51/60			
2/18	3	18/20	4/7	3	X			

Instructor KNIGHT

Department of Vocational and Adult Education
Record Card

Name: Coulter, Bob Address: 7366 Brentwood Phone: 853-3116
 Course: Welding-Plumbers Cty, St zip: Newburgh, IN 47630 Fees: \$90.00
 Time: 6:30-9:30 Thursday Employer: Bayer Instructor: Larry Morris

Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt
1/13	3		2/17	3		3/17	A										
1/27	A		2/24	3		3/24	3										
2/3	3		3/3	3		4/3	3										
2/10	3		3/10	3		4/14	3										

6 Week Reports	Date		% Grade	Number Sessions	Number Attended	Comment
	From	To				
1st	1/13/94	2/24/94	92	6	5	
2nd	3/3/94	4/14/94	92	6	5	
3rd						
Final			92	12	10	

I, undersigned, give my permission for this evaluation to be released to my employer and/or advisory committee.

Signature: Robert Coulter Date: 1-27-94

Evansville-Vanderburgh School Corporation
Department of Vocational and Adult Education
Record Card

Name: COULTER, ROBERT Address: 8945 ANDREA CT. Phone: 853-2305
 Course: PLUMBINGIII94 Cty, St Zip: NEWBURGH, IN 47630 Fees:
 Time: 6:30-9:30 P.M. Employer: Instructor: DREW SWONDER

Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt
9/14/94	3		10/12	3		11/9	3										
9/21/94	3		10/19	3	87%	11/16	0										
9/28	3		10/26	0		11/23	3	100% A+									
10/5	3		11/2	0		11/30	3	90% B-									

6 Week Reports	Date		% Grade	Number Sessions	Number Attended	Comment
	From	To				
1st	9/14	10/19	A	6	6	
2nd	10/26	11/30	B	6	3	
3rd						
Final						

I, undersigned, give my permission for this evaluation to be released to my employer and/or advisory committee.

Signature: Robert Coulter Date: Sept 21 94

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Evansville-Vanderburgh School Corporation
 Department of Vocational and Adult Education
 Record Card

Name: COULTER, ROBERT

Address:

Phone:

Course: MOTORCTRL94

Cty, St Zip:

Fees: \$65.00

Time: 6:30-9:30 P.M.

Employer: PLUMBERS

Instructor: JERRY BURDETTE

Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt
9/13	3		10-11	A		11-8	3	50									
9/20	3		10-18	3	81	11-15	3										
9/27	3	825	10-25	B		11-22	3	80									
10/4	3		11-1	3		11-24	3										

6 Week Reports	Date		% Grade	Number Sessions	Number Attended	Comment
	From	To				
1st	9-13	10-18	84.25	6	5	
2nd	10-25	11-24	74.4	6	6	
3rd						
Final			85			

I, undersigned, give my permission for this evaluation to be released to my employer and/or advisory committee.

Signature: Robert Coulter

Date: 9-15-94

Evansville-Vanderburgh School Corporation
 Department of Vocational and Adult Education
 Record Card

Name: COULTER, ROBERT

Address: 7366 BRENTWOOD

Phone: 853-2305

Course: PRTRDGPLB091393

Cty, St Zip: NEWBURGH, IN 47630

Fees:

Time: 6:30-9:30

Employer:

Instructor: LARRY FRAZEE

Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt
9/20	3 hrs		10/18	3		11/5	3										
9/27	3 HRS		10/25	3		11/22	3										
10/4	3		10/1	3		11/29	3										
10/11	AB		11/8	3													

6 Week Reports	Date		% Grade	Number Sessions	Number Attended	Comment
	From	To				
1st	9/20	10/25	A	6	5	
2nd	11/1	11/29	A	5	5	
3rd						
Final						

I, undersigned, give my permission for this evaluation to be released to my employer and/or advisory committee.

Signature: _____

Date: 9-27-92

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Evansville-Vanderburgh School Corporation
 Department of Vocational and Adult Education
 Record Card

Name: COULTER, ROBERT

Address:

Phone:

Course: PLUMBII091493

Cty, St Zip:

Fees:

Time: 6:30-9:30

Employer:

Instructor: TODD JOHNS

Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt
9/14	A		10/12	3		11/9	3										
9/21	3		10/19	7 1/2		11/16	3										
9/28	A		10/26	3		11/23	3										
10/5	3		11/2	3		11/30	3										

6 Week Reports	Date		Grade	Number Sessions	Number Attended	Comment
	From	To				
1st	9-14	10-19	A	6	3 1/2	
2nd	10-20	11-30	A	6	6	
3rd						
Final			A	12	9 1/2	

I, undersigned, give my permission for this evaluation to be released to my employer and/or advisory committee.

Signature: Robert Coulter Date: 10-26-93

Evansville-Vanderburgh School Corporation
 Department of Vocational and Adult Education
 Record Card

Name: Coulter, ^{Bob}~~Bob~~

Address: 7366 B Brentwood

Phone: 853-3116

Course: Plumbing II-Independent cty, st zip: Newburgh, IN 47630

Fees:

Time: 6:30-9:30

Employer: Bayer's

Instructor: Todd Johns

Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt
1-11	3		2-15	0		3/16	3										
1-25	3		2/22	3		3/22	3										
2-1	3		3/1	3		4/6	3										
2-8	3		3/8	0		4/12	3										

6 Week Reports	Date		Grade	Number Sessions	Number Attended	Comment
	From	To				
1st	1-11	2-22	B	6	5	
2nd	3-1	4-12	A	6	5	
3rd						
Final		4-12	B	12	10	

I, undersigned, give my permission for this evaluation to be released to my employer and/or advisory committee.

Signature: Robert Coulter Date: 1-25-94

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Evansville-Vanderburgh School Corporation
 Department of Vocational and Adult Education
 Record Card

Name: COULTER, ROBERT

Address: 8945 ANDREA CT.

Phone: 853-2305

Course: GEOMETRY95

Cty, St Zip: NEWBURGH, IN 47630

Fees:

Time: 6:30-9:30 P.M.

Employer:

Instructor: JOHN SCHNEIDER

Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt
2-2	3		3-2	3	A	4-6	3										
2-9	3		3-9	3		4-13	3	A									
2-16	3		5-16	3		4-20	3										
2-23	3		3-23	3	100												

6 Week Reports	Date		% Grade	Number Sessions	Number Attended	Comment
	From	To				
1st	1-26-95	3-2-95	80	6	4	
2nd	3-9	4-20	85	6	5	
3rd						
Final						

I, undersigned, give my permission for this evaluation to be released to my employer and/or advisory committee.

Signature: Robert Coulter

Date: 2-23-95

Evansville-Vanderburgh School Corporation
 Department of Vocational and Adult Education
 Record Card

Name: COULTER, BOB

Address: 8945 ANDREA CT.

Phone: 853-5752

Course: PLUMBINGIII95

Cty, St Zip: NEWBURGH, IN 47630

Fees:

Time: 6:30-9:30 P.M.

Employer:

Instructor: DREW SWONDER

Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt
1/25	3		2/22	3	A-	3/22	3	A-									
2/1	3		3/1	3		4/5	3										
2/8	0		3/8	3		4/12	3										
2/15	3		3/15	3		4/19	3	B-									

6 Week Reports	Date		% Grade	Number Sessions	Number Attended	Comment
	From	To				
1st	1/25	2/1	B-	6	5	✓
2nd	2/8	4/19	B-	6	5	
3rd						
Final			B+			

I, undersigned, give my permission for this evaluation to be released to my employer and/or advisory committee.

Signature: Robert Coulter

Date: 2-15-95

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Evansville-Vanderburgh School Corporation
 Department of Vocational and Adult Education
 Record Card

Name: COULTER, BOB
 Course: PLUMBINGIV95
 Time: 6:30-9:30

Address:
 Cty, St Zip:
 Employer:

Phone:
 Fees:
 Instructor: MARK DILL

Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt
<i>Done with app</i>																	

6 Week Reports	Date		% Grade	Number Sessions	Number Attended	Comment
	From	To				
1st						
2nd						
3rd						
Final						

I, undersigned, give my permission for this evaluation to be released to my employer and/or advisory committee.

Signature: _____ Date: _____

Evansville-Vanderburgh School Corporation
 Department of Vocational and Adult Education
 Record Card

Name: COULTER, ROBERT
 Course: PLBPRT95
 Time: 6:30-9:30

Address: 7944 F CAMP BEASEND
 Cty, St Zip: NEWBURGH, IN 47630
 Employer:

Phone: 853-2305
 Fees:
 Instructor: C.R. WESSEL

Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt
9-11	3		10-4	3		11-6	3										
9-18	3		10-14	3	95	11-13	3										
9-25	3	90	10-23	A		11-20	3										
10-2	3	85	10-30	3	85	11-27	3	87									

6 Week Reports	Date		% Grade	Number Sessions	Number Attended	Comment
	From	To				
1st	9-11	10-16	90	6	10	
2nd	10-23	11-27	90	6	5	
3rd						
Final			90			

I, undersigned, give my permission for this evaluation to be released to my employer and/or advisory committee.

Signature: *Robert Coulter* Date: 9-18-95

Evansville-Vanderburgh School Corporation
 Department of Vocational and Adult Education
 Record Card

Name: COULTER, BOB

Address:

Phone:

Course: PLUMBINGIV95

Cty. St Zip:

Fees:

Time: 6:30-9:30

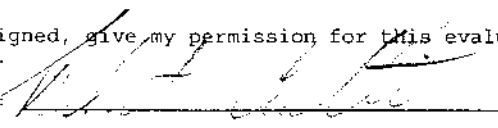
Employer:

Instructor: MARK DILL

Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt	Date	Hr	Tt
9/13	3		10-11	3		11-8	3										
9-20	3		10-18	3		11-15	3	87									
9/27	3		10-23	AE		11-28	3										
10/4	3	83	11-1	3	88	11-29	3										

6 Week Reports	Date		% Grade	Number Sessions	Number Attended	Comment
	From	To				
1st	9-13	10-18	83	6	65	
2nd	10-23	11-29	86	6	5	
3rd						
Final						

I, undersigned, give my permission for this evaluation to be released to my employer and/or advisory committee.

Signature: 

Date: 10-4-95

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Name ROBERT COULTER Instructor TODD JOHNS

Class PLUMBING - INDEPENDENT Employer/JAC BAYER'S

6 week Report	Date		% Grade	Number Sessions	Number Attended	Comment
	From	To				
1st.	1-25	3-8	C	6	4	
2nd.	3-15	4-19	C	6	5	
3rd.						
Final			C	12	9	

I, the undersigned, give my permission for this evaluation to be released to my employer and/or advisory committee.

Signature *Robert Coulter* Date 2-1-93

Name Coulter, Bob Instructor Johns, Todd

Class Independent Plumbing Employer/JAC Bayer Plumbing

6 week Report	Date		% Grade	Number Sessions	Number Attended	Comment
	From	To				
1st.	SEPT 14	OCT. 19	B	6	4	SEMESTER GRADE
2nd.	OCT 26	NOV 30	C	6	5	C
3rd.						
Final						

I, the undersigned, give my permission for this evaluation to be released to my employer and/or advisory committee.

Signature *Robert Coulter* Date 9-28-92

RECEIVED

JAN 14 2008

Indiana Professional
Licensing Agency

Evansville-Vanderburgh School Corporation
Department of Vocational and Adult Education

RECORD CARD

Date 1-25 Age 27
 Name Robert Coulter Phone 853-5752
 Address 7366 Leontine Zip 47630
 City Newburgh State IN
 Employer Edger's Plumbing
 Occupation Apprentice Fee _____
 Course Plumbing Institute Time _____

Date	Hrs.	Test	Date	Hrs.	Test
1-25	0		4-5	3	
2-1	3		4-12	3	
2-8	1 1/2		4-14	3	
2-10	1 1/2		4-19	3	
3-1	3				
3-8	3				
3-15	3				
3-22	0				

Instructor TODD JOHNS

Evansville-Vanderburgh School Corporation
Department of Vocational and Adult Education

RECORD CARD

Date 9-14-92 Age 27
 Name Coulter, Bob Phone 473-2677
 Address 5209 Plecent Ridge Zip 47630
 City Newburgh State IN
 Employer Payer Plumbing
 Occupation _____ Fee _____
 Course Independent Plumbing Time 6:30-9:30

Date	Hrs.	Test	Date	Hrs.	Test
9-14	3		11-9	3	
9-21	0		11-16	1 1/2	
9-28	3		11-23	1 1/2	
10-5	3		11-30	3	
10-12	3				
10-19	0				
10-26	3				
11-2	3				

Instructor Johns, Todd

Name ROBERT COULTER Instructor JOHN SCHNEIDER

Class ALGEBRA - PLUMBERS Employer/JAC _____

Indiana Professional Licensing Agency

JAN 14 2008

RECEIVED

6 week Reports	Date		% Grade	Number Sessions	Number Attended	Comment
	From	To				
1st.	9-17-92	10-22-92	90	6	5	
2nd.	10-29-92	12-10-92	80	6	3 5	
3rd.						
Final			85			

I, the undersigned, give my permission for this evaluation to be released to my employer and/or advisory committee.

Signature *Robert Coulter* Date 10-15-92

Name Coulter, Robert Instructor Buehler

Class First Aid Employer/JAC _____

6 week Reports	Date		% Grade	Number Sessions	Number Attended	Comment
	From	To				
1st	1-20	2-24	88	6	4	
2nd	3-3	4-14	96	6	5	
3rd			96			
Final			94			

I, undersigned, give my permission for this evaluation to be released to my employer and/or advisory committee.

Signature *Robert Coulter* Date 2-3-93

Name ROBERT COULTER Instructor ELAINE KNIGHT

Class MATH REFRESHER Employer/JAC _____

Indiana Professional
Licensing Agency

6 week Reports	Date		% Grade	Number Sessions	Number Attended	Comment
	From	To				
1st	1-14-92	2-18-92	89	6	6	
2nd	2-25-92	4-7-92	X	6	6	
3rd						
Final			95	12	12	

JAN 14 2008

RECEIVED

I, undersigned, give my permission for this evaluation to be released to my employer and/or advisory committee.

Signature _____ Date _____

Name ROBERT COULTER Instructor JOHN BOCKHORST

Class WELDING Employer/JAC _____

6 week Reports	Date		% Grade	Number Sessions	Number Attended	Comment
	From	To				
1st	1-16-92	2-20-92	95	6	5	
2nd	2-27-92	4-9-92	93	6	6	
3rd						
Final						

I, undersigned, give my permission for this evaluation to be released to my employer and/or advisory committee.

Signature Robert Coulter Date 1-23-92

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Evansville-Vanderburgh School Corporation
 Department of Vocational and Adult Education

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RECORD CARD

Date January 20, 1993 Age 27
 Name Coulter, Robert Phone 853-5752
 Address 7366 Brentwood Zip 47630
 City Evansville State In
 Employer Bayer's Plumbing
 Occupation Plumber Fee _____
 Course First Aid Time _____

Date	Hrs.	Test	Date	Hrs.	Test	Date	Hrs.	Test
1/20	3		3/27	2				
1/27	0		3/24	3				
2/3	3		3/31	3				
2/10	3		4/7	3				
2/17	3							
3/24	0							
3/3	3							
3/10	3							

Instructor SUSTIN Richler

Evansville-Vanderburgh School Corporation
 Department of Vocational and Adult Education

7

RECORD CARD

Date 9-16-92 Age _____
 Name COULTER, ROBERT Phone 473-2677
 Address 5209 PLEASANT RIDGE Zip 47711
 City EVANSVILLE State IN
 Employer _____
 Occupation _____ Fee _____
 Course ALGEBRA - PLUMBERS Time 6:30-9:30

Date	Hrs.	Test	Date	Hrs.	Test	Date	Hrs.	Test
9/17	3		10/29	3				
9/24	3		11/5	4				
10/1	3		11/12	3				
10/8	3		11/18	3				
10/15	3		12/3	3				
10/22	3		12/10	3				

Instructor JOHN SCHNEIDER

Expired Plumber Contractor

Please Circle your answer to ALL the following questions: **SINCE YOU LAST RENEWED YOUR LICENSE:** (if yes to questions 1-3, please attach details of action taken)

DATE EXPIRED 12/31/2003	RENEWAL FEE **See Below
LICENSE NUMBER PC89800270	CURRENT STATUS Expired
Howard P. Cahill 3041 Clearland Bldg #27 Louisville KY 40206	

1. Have any professional license, certificate, registration, or permit you hold or have held been disciplined or are formal charges pending? YES NO

2. Have you been denied a license, certificate, registration, or permit in any state? YES NO

3. Have you been convicted of or pled guilty to a violation of a federal or state law or are criminal charges pending? YES NO

You must sign and date below. By signing this form, you are attesting that the information on this renewal is true and correct and that you have met all required continuing education hours if applicable. This form will be returned if it is not correctly completed which will delay the renewal.

Signature: Howard P. Cahill Date: 5/15/08

ENTER HOME ADDRESS
CORRECTIONS BELOW

CONTROL # 87250

MAY 15 2008

AMOUNT PAID \$200.00

Remove at perforation

Remove at perforation

Remove at perforation

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Indiana Plumbing Commission
402 West Washington Street, Room W072
Indianapolis, Indiana 46204
Telephone: (317) 234-3022
Fax: (317) 233-5559
Website: www.pla.IN.gov

Governor Mitchell E. Daniels, Jr

Howard P. Cahill
3041 Cleavland Bldg #27
Louisville KY 40206

May 9, 2008

PC89000270
12/31/2003

Dear Howard P. Cahill

This letter is in regards to the status of your plumbing license. Your license to practice plumbing expired [date], which is more than three years.

Recently, our office received several inquires from plumbers in your situation wanting to know how to have a lapsed license renewed or reinstated. Upon receipt of these requests, we were prompted to take a close look at the code cites which govern the reinstatement of delinquent licenses. Based upon this review, it was determined that according to IC 25-1-8-6 (d) you are eligible for the reinstatement of your lapsed plumbing license. IC 25-1-8-6 (d) states in pertinent part:

(d) Notwithstanding any other law regarding the reinstatement of a delinquent or lapsed license, certificate, or registration, unless a statute specifically does not allow a license, certificate, or registration to be reinstated if it has lapsed for more than three (3) years, the holder of a license, certificate, or registration that was issued by the board that is more than three (3) years delinquent must be reinstated upon meeting the following requirements:

- (1) Submission of the holder's completed renewal application.
- (2) Payment of the current renewal fee established by the board under section 2 of this chapter.
- (3) Payment of a reinstatement fee equal to the current initial application fee.
- (4) If a law requires the holder to complete continuing education as a condition of renewal, the holder shall provide the board with a sworn statement, signed by the holder, that the holder has fulfilled the continuing education requirements required by the board for the current renewal period.
- (5) Complete such remediation and additional training as deemed appropriate by the board given the lapse of time involved.
- (6) Any other requirement that is provided for in statute or rule that is not related to fees.

Therefore, although your license has lapsed for more than three years, upon receipt of the above listed your request for reinstatement will be presented to the board for them to determine the appropriate remediation and additional training needed. Please understand that we will not be able to update your license to active status until you have provided all of the above listed and the board has reviewed that information. If you have any questions or need additional information, please do not hesitate to contact our office.

Sincerely,

Lorrie Ruble
Case Manager
Indiana Plumbing Commission

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February 18, 2008

INDIANA PLUMBING COMMISSION

COMMISSION MEMBERS	ORIG APP'T	TERM EXP	STATUS
Matt Buczovich 51807 N. Mayflower Road South Bend, IN 46628 574 272-0165 Home 574 273-0300 Office 574 273-1300 Fax 574 298-6365 Cell mattb172@aol.com	12/17/2002	12/17/2006	Journey Plm
Eric Ott 1994 N. SR 25 PO Box 47 Logansport, IN 46947 574 753-3182 Office 574 753-7373 Fax eott@dillingmechanical.com Email	01/ /06		Plm Contractor Liaison as of 1/2008
William Ciriello 160 South First Avenue Beech Grove, IN 46107 317 787-5391 Office 317 787-5392 Office 317 787-5392 Fax 317 432-6448 Cell wicplmbg@aol.com Email	6/1/2003	12/31/2006	Plm Contractor Chairman Liaison before 1/2008
Owen D. Stephens 2901 E. 83 rd Place Merrillville, IN 46411 219 947-2585 Home 219 942-7224 X225 Office 219 741-3311 Cell 219 942-6299 Fax ualu210bm@airbaud.net	3/15/2002	12/1/2007	Journey Plm

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Robert S. Synko
PO Box 44657
Indianapolis, IN 46244-0657
317 233-7185 Work
317 233-7177 Work
rsynko@isdh.in.gov

6/25/03

Indiana State Dept of Health
Secretary

John Van Cleve
12424 Pirates Roost Road
Monticello, IN 47960
574 965-2022 Office
574 965-2001 Home
219 869-1213 Cell
jvanclev@hubbell-premise.com

3/16/2001

7/1/2005 Public Member

Angela Smith Jones 317 234-3048 Board Director ajones@pla.IN.gov
Mary Kate Adams 317 234-3049 Assistant Board Director maadams@pla.IN.gov

402 West Washington Street
Room W072
Indianapolis, IN 46204

Group 317 234-3022
Fax 317 233-4236

MEETING DATES FOR 2008

INDIANA PLUMBING COMMISSION
APPLICATION REVIEW 8:00 A.M.
MEETING TIME: 9:30 A.M.

DATES		ROOMS
January	23, 2008	W072
March	26, 2008	W072
May	28, 2008	W072
July	23, 2008	W072
September	24, 2008	W072
November	26, 2008	W072

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