The files transmitted within this agenda packet may contain confidential and/or sensitive information. The files are intended solely for the use of the members of the Indiana Plumbing Commission. You are advised that you should not disseminate, distribute or copy any of the files transmitted within this agenda packet to anyone other than another member of the Indiana Plumbing Commission or staff members of the Indiana Professional Licensing Agency. If you disseminate, distribute or copy any of the files transmitted within this agenda packet, you and/or IPLA could be held liable if those documents are confidential or of a sensitive nature.

If you know of someone who needs copies or additional information prior to the meeting, please ask them to contact IPLA staff for assistance. Materials that are not to be disseminated to the general public can be removed by staff before the documents are provided to the public.
AGENDA
THE INDIANA PLUMBING COMMISSION

Wednesday, July 23, 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 MAY 28, 2008 MEETING OF THE COMMISSION

V. PERSONAL APPEARANCES 9:45 a.m.
   A. Phillip Wenger (Reinstatement of License)
   B. Gilbert A. Ruehl (Reinstatement of License)
   C. Howard P. Cahill (Reinstatement of License)
   D. Robert Coulter (Reinstatement of License)
   E. Cathie D. Knear (Reinstatement of License)

VI. PRESENTATION
   By Vendors regarding RFP 07-72

VII. ADMINISTRATIVE HEARINGS
    A. In the Matter of the Application of Nathan Boisman
       Cause No.: IPC 08-10
       Re: Appeal of Denial of Licensure as a Journeyman Plumber 10:30 a.m.

VIII. PETITIONS FOR REVIEW
    A. Brent Smith (withdrawn)

IX. DELIBERATIONS AND POSSIBLE ISSUANCE OF FINAL ORDER
   None.

IX. CONSIDERATION OF ADMINISTRATIVE LAW JUDGE ORDERS
    A. Daniel J. Hrasch
       Cause No.: IPC 08-09
       Re: Appeal of Denial to Sit for the Journeyman Plumber Exam

    B. Jeremy Dykhuiizen
       Cause No.: IPC 08-08
       Re: Appeal of Denial of Licensure as a Journeyman Plumber
X. EXAMINATION Licensure/UnlICENSED PRACTICE

A. Dan Rueille (Jeffrey Troutman) – Alert Plumbing
B. Justin Dorsey (Jason Sullivan) – Mr. Rooter Plumbing
C. Robert T. Tippmann (David Tippman) – Tippmann heating and Air LLC
D. Phil Schroering (Adam Wahl) – Schroering Plumbing, Heating & A/C, LLC

X. APPLICATIONS FOR APPROVAL – PLUMBING APPRENTICE SCHOOL

A. South Central Indiana Association of Plumbing, Heating and Cooling Contractors
B. Fort Wayne Area Plumbing, Heating and Cooling Contractors, Inc.
C. ARS of Indiana

XI. APPLICATIONS FOR LICENSURE

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

XII. REVIEW OF PROBATIONARY REPORTS


XIII. DISCUSSION

A. Request for Reinstatement of a Journeyman Plumber License
   Re: Dale Funk
B. Request for Renewal of Temporary Plumbing Contractor’s License (3rd Request)
   Re: Two Guys Plumbing

XIV. BOARD DIRECTOR’S REPORT

A. New Security Entry into Building
B. Legislative Proposals

XV. OLD/NEW BUSINESS

A. Proposed Rules/Statute Changes
   Re: Changes for Exam and Fees Rule Draft (LSA # 08-538)
B. Petitions for Reinstatement
   Re: Guidelines for Submittals

XVI. ADJOURNMENT

Next Scheduled Meeting:

Wednesday, September 24, 2008
Indiana Government Center-South
Room W072
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

Philip Lavon Wenger
28329 CR 32
Elkhart IN 46517

May 16, 2008

Dear Philip Lavon Wenger:

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, July 23, 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,

[Signature]

Lorrie Ruble
Case Manager
State Board of Registration for Professional Engineers

Personal Appearance
Philip L. Wenger  
28329 CR 32  
Elkhart, IN 46517  
Ph & Fx: (574) 862-2501  

Sent VIA Facsimile (317) 233-4236  

May 14, 2008  

Indiana Plumbing Commission  
Attn: Mary K. Adams  
402 West Washington Street, Room W072  
Indianapolis, IN 46204  

Dear Mary:  

I am scheduled to make a personal appearance before the plumbing commission on Wednesday, May 28\textsuperscript{th} at 9:45am for a journeyman plumbing license.  

I will be unable to make this appointment due to other commitments. I would like to extend my appearance before the plumbing commission to July 23\textsuperscript{rd}. Please notify me in writing by mail or fax that this is acceptable.  

Thank you for your assistance in this matter.  

Sincerely,  

Philip L. Wenger
Sent VIA Facsimile (317) 233-4236

May 14, 2008

Indiana Plumbing Commission
Attn: Mary K. Adams
402 West Washington Street, Room W072
Indianapolis, IN 46204

Dear Mary:

I am scheduled to make a personal appearance before the plumbing commission on Wednesday, May 28th at 9:45am for a journeyman plumbing license.

I will be unable to make this appointment due to other commitments. I would like to extend my appearance before the plumbing commission to July 23rd. Please notify me in writing by mail or fax that this is acceptable.

Thank you for your assistance in this matter.

Sincerely,

Philip L. Wenger

Philip L. Wenger
Philip Lavon Wenger
28329 CR 32
Elkhart IN 46517

April 7, 2008

Dear Philip Lavon Wenger:

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
CORRECTED LETTER

March 19, 2008

Dear Philip Lavon Wenger:

This letter is in regards to the status of your plumbing license. Your license to practice plumbing expired 12-31-03, which is more than three years. The agency is in receipt of your fee of $80.00. Since it’s over the three years you must pay the application fee of $30.00, please submit the payment with the letter attached before March 24, 2008. Following is the correct statutory information pertaining to your situation.

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
Expired Journeyman Plumber

DATE EXPIRED | RENEWAL FEE
-------------|-------------
12/31/2008   | **See Below**

LICENSE NUMBER | CURRENT STATUS
--------------|----------------
JP02073491    | Expired

Philip Lavon Wenger  
28329 CR 32   
Elkhart IN 46517

Enter Home Address Corrections Below

CONTROL #: 812830

AMOUNT PAID: $80.00

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)

1. Has 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: Philip Lavon Wenger  
Date: 3-15-08

Remove at perforation

Make check payable to: Indiana Professional Licensing Agency  
Mail to: Attn: Plumbing Commission  
402 W. Washington St. Room W072  
Indianapolis, IN 46204
Dear Philip Lavon Wenger

This letter is in regards to the status of your plumbing license. Your license to practice plumbing expired December 31, 2005, thus you did not receive a renewal application for the 2007 renewal.

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 (c) you are eligible for the reinstatement of your lapsed plumbing license. You are required to submit the following:

1. A completed renewal application.
2. Payment of the current renewal fee.
   ($100.00 for Contractors and $30.00 for Journeymen)
3. Payment of the reinstatement fee of $50.00.

At this time, if you would like to have your license reinstated, please contact our office to request a renewal form. You may contact our office via email at pla10@pla.in.gov or by telephone at (317) 234-3022. Please understand that we will not be able to update your license to active status until you have provided all of the above listed.

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

RECEIVED
MAR 19 2008
Indiana Professional Licensing Agency
4/7/08 Mailed personal appearance letter 320.

3/26/08 Mr. Wenger request the Commission to reinstate his expired JP license. The Commission request Mr. Wenger come in for a personal appearance on May 26, 2008 at 9:45 a.m. Give file to SG to send the letter on 4/4/08. mka.

3/11/08 Sent notification OWES $80.00 renewal fee. LRa.
<table>
<thead>
<tr>
<th>General</th>
<th>Licenses</th>
<th>Education</th>
<th>Employment</th>
<th>Public Info</th>
<th>Supp. Info</th>
</tr>
</thead>
<tbody>
<tr>
<td>License #</td>
<td>Type</td>
<td>Status</td>
<td>Probation?</td>
<td>Limited?</td>
<td></td>
</tr>
<tr>
<td>&lt;not issued&gt;</td>
<td>Journeyman Plumber</td>
<td>Null and Void/Expired</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>JL02073491</td>
<td>Journeyman Plumber</td>
<td>Expired</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Address: Issue Date: 01/01/1900
Detail: Obtained By: Examination
Additional:
Expiration Date: 12/31/2003
Date This Status: 03/07/2008
Reason Changed: Expired License Renewal
Date Archived:
Effective Date: 01/01/1900
Last Reprint Date:
Reprint Count: 0

Remarks:

Applicant Number: 263929

Renewal ID:
Last Renewal Date: 12/05/2001
Renewal ID:
Philip Lavon Wenger
28329 CR 32
Elkhart IN 46517

March 7, 2008
JP02073491
12/31/2003

Dear Philip Lavon Wenger

This letter is in regards to the status of your plumbing license. Your license to practice plumbing expired December 31, 2005, thus you did not receive a renewal application for the 2007 renewal.

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 (c) you are eligible for the reinstatement of your lapsed plumbing license. You are required to submit the following:

1. A completed renewal application.
2. Payment of the current renewal fee.
   ($100.00 for Contractors and $30.00 for Journeymen)
3. Payment of the reinstatement fee of $50.00.

At this time, if you would like to have your license reinstated, please contact our office to request a renewal form. You may contact our office via email at pla10@pla.in.gov or by telephone at (317) 234-3022. Please understand that we will not be able to update your license to active status until you have provided all of the above listed.

If you have any questions or need additional information, please do not hesitate to contact our office.

Sincerely,

[Signature]
Lorrie Ruble
Case Manager
Indiana Plumbing Commission
January 23, 2008

Philip Lavon Wenger
28329 CR 32
Elkhart IN  46517

INCOMPLETE NOTIFICATION

Upon review of your application for licensure in the State of Indiana, we have found that further evaluation cannot be performed until the following documents have been submitted.

The check received was to the City of Indianapolis and incorrect fee. Please submit a fee of $30.00 made payable to Indiana Professional Licensing Agency.

It is your responsibility to see that proper documentation is received. Your immediate attention to this matter is greatly appreciated. If you have made arrangements for the documentation noted above to be sent to this office, please disregard this notice. When all documentation is received, the Indiana Plumbing Commission will review your file.

When a “notarized copy” is requested the notary must make the statement that this document is an exact copy of the original. Documents with just a notary seal will not be accepted.

**To promote better service, we ask that you also supply us with your email address.**

If you have any questions, please contact us by email at pla10@pla.IN.gov or by phone at (317) 234-3022.

Lorië Ruble
Case Manager
Indiana Plumbing Commission
JOURNEYMAN

APPLICATION CHECKLIST

C 25-28.5-1-13

$30 FEE Pending

AT LEAST 18 YEARS OF AGE

APRENTICE LICENSE # JPO 2073491

EXPIRATION DATE 12/31/03

JOURNEYMAN LICENSE #

EXPIRATION DATE

APPLYING WITH TRAINING OR EXPERIENCE, CHOOSE ONE:

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

☐ IS PROGRAM APPROVED?

☐ SIGNATURE OF MANAGER/SPONSOR?

☐ NUMBER OF YEARS COMPLETED

☐ SECTION ONE AND APPLICATION NOTARIZED

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

☐ ALL EXPERIENCE UNDER LICENSED PLUMBING CONTRACTOR(S)?

☐ CORPORATE PLUMBING CONTRACTOR LICENSE #

☐ EXPIRES:

☐ PLUMBING CONTRACTOR LICENSE #

☐ EXPIRES:

☐ SECTION TWO AND APPLICATION NOTARIZED

LENGTH OF EMPLOYMENT: 4 years

☐ EXPERIENCE TOTALS AT LEAST 4 YEARS?

☐ YES ☐ NO

EMPLOYER AFFIDAVITS:

☐ YES ☐ NO

APPLICATION AFFIDAVITS:

☐ YES ☐ NO

☐ HAS A CONVICTION RECORD

☐ DOCUMENTATION ATTACHED

☐ APPLICATION COMPLETE

☐ DOCUMENTATION REQUESTED

☐ APPLICATION NOTARIZED

ADDITIONAL SUPPORTING DOCUMENTATION

In fee fee wrong check dentin

COMMISSION ACTION SECTION

☐ APPROVED

TABLED, PENDING RECEIPT OF THE FOLLOWING:

☐ DENIED

REASON FOR DENIAL: STATUTE IC

RULE 860 IAC

COMMENTS:

COMMISSION SIGNATURE

DATE

COMMISSION SIGNATURE

DATE
APPLICATION FOR JOURNEYMAN PLUMBER
EXAMINATION FOR LICENSING
State Form 40902 (R10 / 11-02)
Approved by State Board of Accounts, 2002.

FEE: $50.00

ALL FEES ARE NON-REFUNDABLE AND NON-TRANSFERABLE.

* 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: Philip Levon Wengar
Date of birth (month, day, year): 6-16-50
Address (number and street, city, state, ZIP code): 28329 CR 3A, Elkhart IN 46517
County: Elkhart
Telephone number: 574-862-2501

Have you ever been convicted of a crime? (If “Yes”, provide a copy of the court order and any pertinent documents)
☐ Yes ☐ No

INSTRUCTIONS:
1. 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).
2. 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
APPROVED APPRENTICESHIP PROGRAM SPONSOR CERTIFICATION OF COMPLETION

I have successfully completed the following four (4) years of training in an approved apprenticeship program, satisfying the requirements as defined in Commission rule, 880 IAC 1-1-9, as verified by the sponsor of the approved apprenticeship program, herein:

Name of apprenticeship program sponsor: 
Telephone number:
Address (number and street, city, state, ZIP code, county):
Date of enrollment (month, year): 
Date of completion (month, year):

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

Date of enrollment: 
Signature of manager of approved apprenticeship program sponsor:
Date of completion: 
Date signed:

NOTARY CERTIFICATE

STATE OF: 
COUNTY OF: }

I, ____________________________, having been duly sworn, do hereby certify 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: 
Signature of Notary Public:
Printed or typed name of manager of approved apprenticeship program sponsor: 
Printed or typed name of Notary Public:
Date subscribed and sworn to Notary Public: 
County of residence: 
Date commission expires: 

Indiana Professional Licensing Agency
302 W. Washington St., Rm. ED34
Indianapolis, IN 46204-2700
(317) 232-2980
www.in.gov/pla

RECEIVED

JAN 22 2008
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:

<table>
<thead>
<tr>
<th>Name of employer</th>
<th>Plumbing contractor license number (if applicable):</th>
</tr>
</thead>
<tbody>
<tr>
<td>Crystal Valley Heating &amp; Air Conditioning</td>
<td>PC 199000003</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address (number and street, city, state, ZIP code)</th>
<th>Telephone number</th>
</tr>
</thead>
<tbody>
<tr>
<td>8005 CR 37, Middlebury, IN 46540</td>
<td>574-825-2611</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>County</th>
<th>Dates of employment (month, day, year):</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elkhart</td>
<td>4/9/92 From 11/14/04 To Present</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of employer</th>
<th>Plumbing contractor license number (if applicable):</th>
</tr>
</thead>
<tbody>
<tr>
<td>James Plitchen</td>
<td>PC 199000003</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address (number and street, city, state, ZIP code)</th>
<th>Telephone number</th>
</tr>
</thead>
<tbody>
<tr>
<td>400 Autumn Dr., Middlebury, IN 46540</td>
<td>574-825-2611</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>County</th>
<th>Dates of employment (month, day, year):</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elkhart</td>
<td>2/15/92 From To Present</td>
</tr>
</tbody>
</table>

**APPLICANT AFFIDAVIT OF EXPERIENCE IN PLUMBING TRADE**

I hereby certify that I, Philip Levon Wenger, have worked in the plumbing trade as defined in commission rule 860 IAC 1-1-9, for the period of 11/9/92 to Present, for Crystal Valley Heating & Air Conditioning, the name of company or plumbing business.

<table>
<thead>
<tr>
<th>Name of employer or licensed contractor</th>
<th>Name of company or plumbing business</th>
</tr>
</thead>
<tbody>
<tr>
<td>8005 CR 37, Middlebury, IN 46540</td>
<td>Crystal Valley Heating &amp; Air Conditioning</td>
</tr>
</tbody>
</table>

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):

<table>
<thead>
<tr>
<th>Reason(s)</th>
</tr>
</thead>
</table>

Signature of applicant: Philip Levon Wenger

**NOTARY CERTIFICATE**

STATE OF Indiana
COUNTY OF Elkhart

I, Philip Levon Wenger, having been duly sworn and subscribed, do certify, to the best of my knowledge and belief, 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: Philip Levon Wenger
Signature of Notary Public: Stacy A. Michael

Printed or typed name of applicant: Philip Levon Wenger
Printed or typed name of Notary Public: Stacy A. Michael

Date subscribed and sworn to Notary Public: 1/14/08
County of residence: Elkhart
Date commission expires: 2/26/2014

Note: I had a Journeymen Plumbing license # JP02073491 which expired 12/31/2003.
EMPLOYER AFFIDAVIT OF EXPERIENCE IN PLUMBING TRADE

I hereby certify that Philip Loven Wenger has worked in the plumbing trade as defined in commission rule 860 IAC 1-1-9 for the period of 11-9-92 to Present.

Signature of employer: Stacy A. Fletcher
Printed or typed name of employer: Stacy A. Fletcher
Address (number and street, city, state, zip code): 800 S. CR 37, Middlebury IN 46540
Plumbing contractor license number: PC 19970063
Date signed: 1/17/08

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

NOTARY CERTIFICATE

STATE OF Indiana
COUNTY OF Elkhart

I, James A. Fletcher, 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: Stacy Michael
Printed or typed name of employer: Stacy Michael
Date subscribed and sworn to Notary Public: 1/17/08

SECTION 3 (to be completed by all applicants)

STATE OF Indiana
COUNTY OF Elkhart

I, Philip Loven Wenger, 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: Philip Loven Wenger
Printed or typed name of applicant: Philip Loven Wenger
Date subscribed and sworn to Notary Public: 1/17/08

NOTARY CERTIFICATE

Signature of Notary Public: Stacy Michael
Printed or typed name of Notary Public: Stacy Michael
County of residence: Elkhart
Date commission expires: 2/26/2014

RECEIVED

JAN 2 2 2008
Indiana Professional Licensing Agency
Elkhart Community Schools

Elkhart, Indiana

Division of Adult Education

This certifies that

Phillip Wenger

has completed a course of study in the theory and practice of Plumbers' Apprenticeship Program and having performed the required procedures is awarded this Certificate.

Given this 8th day of June, 1977.

Richard O. Miller
Superintendent of Schools

James H. Bradstreet
Director of Vocational & Continuing Education
In the name and by the Authority of
THE STATE OF INDIANA

This Certifies That

Philip Lavon Wenger

Having fulfilled the requirements for registration under the laws of the State of Indiana is hereby authorized to practice as a

Journeyman Plumber

For the purpose of providing service and is entitled to all privileges thereunto appertaining,
In testimony whereof, we have caused these letters to be made patent, and the Great Seal of the State to be hereunto affixed this

11th day of December 1985

[Seal]

Chairman
The Plumbers' Commission

Executive Director
Indiana Professional Licensing Agency

State Form 19558

Indiana Professional Licensing Agency

PLP2073491
June 3, 2008

Dear Gilbert A. Ruehl:

The Board of Registration for Professional Engineers of Indiana reviewed your application for licensure and supporting documentation at their recent board meeting.

The Board has scheduled a personal appearance regarding your application and the lack of information contained within. Please bring any pertinent documentation concerning your application to address the following areas:

The meeting will be held on **July 23, 2008**, at 9:45 a.m. in the Professional Licensing Agency's Conference Room W064, Indiana Government Center South, 402 W. Washington Street, Indianapolis, Indiana 46204. 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 application. To do so, please submit a letter in writing to our office requesting that your application be withdrawn. If you do not make a personal appearance as requested or submit a request to withdrawal your application to be received by our office one week before the board meeting, your application may be denied. Please understand that a denial becomes a part of your permanent record.

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
<table>
<thead>
<tr>
<th>General</th>
<th>Licenses</th>
<th>Education</th>
<th>Employment</th>
<th>Public Info</th>
<th>Supp Info</th>
<th>Addresses</th>
<th>Remarks</th>
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<td>Type</td>
<td>Status</td>
<td>Probation?</td>
<td>Limited?</td>
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<tr>
<td>JP02076025</td>
<td>Journeyman Plumber</td>
<td>Expired</td>
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</tr>
</tbody>
</table>

Address:  
Issue Date: 01/01/1990  
Applicant Number: 264250

Detail:  
Obtained By: Examination  
From State/Prov:

Supp. Info:  
Expiration Date: 12/31/2003  
From Country:

Additional:  
Date This Status: 10/21/2005  
Last Renewal Date: 11/20/2001

Reason Changed: Terminated  
Renewal ID:

Date Archived:  
Effective Date: 01/01/1990  
Last Reprint Date:

Reprint Count: 0  
Remarks:
Type: Alert
Reason: Renewal Checklist Incomplete

Place Hold On

Remarks:

Past the renewal period for the license, the holder must pay $20.00 plus the $20.00 application fee, and file the renewal form.
<table>
<thead>
<tr>
<th>DATE EXPIRED</th>
<th>RENEWAL FEE</th>
<th>LICENSE NUMBER</th>
<th>CURRENT STATUS</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/31/2003</td>
<td><strong>See Below</strong></td>
<td>JP02079625</td>
<td>Expired</td>
</tr>
</tbody>
</table>

**Expired Journeyman Plumber**

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)*

1. Has 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**

**Date**

**Amount Paid**

Remove at perforation
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

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

June 9, 2008

Dear Howard P. Cahill:

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, July 23, 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,

Lorrie Ruble
Case Manager
Indiana Plumbing Commission

Personal Appearance
June 3, 2008

Dear Howard P. Cahill:

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,

Lorrie Ruble
Case Manager
Indiana Plumbing Commission
# 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)

<table>
<thead>
<tr>
<th>DATE EXPIRED</th>
<th>RENEWAL FEE</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/31/2003</td>
<td><strong>See Below</strong></td>
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</table>

**License Number**

<table>
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<tr>
<th>CURRENT STATUS</th>
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<tbody>
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<td>Expired</td>
</tr>
</tbody>
</table>

| **PC89620270** |

Howard P. Callie
3041 Clayland Blvd #27
Louisville, KY 40208

**ENTER HOME ADDRESS CORRECTIONS BELOW**

**Control # 6254**

**May 15, 2008**

**Amount Paid $250.00**

---

**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**

**Date**

---

**Remove at perforation**

---

**Remove at perforation**

---

**Remove at perforation**
Howard P. Cahill  
3041 Cleveland 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 inquiries 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,

[Signature]

Lorrie Ruble  
Case Manager  
Indiana Plumbing Commission
Robert Coulter
7222 Oaklawn Drive
Newburgh IN 47630

June 3, 2008

Dear Robert Coulter:

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,

Lorrie Ruble
Case Manager
Indiana Plumbing Commission
### 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)

| Question                                                                 | Yes | No |  
|--------------------------------------------------------------------------|-----|----|---|
| 1. Has any professional license, certificate, registration, or permit you hold or have held been disciplined or are criminal 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 plead guilty to a violation of a federal or state law or are criminal charges pending? | YES | NO | 

You must sign and date below and attesting that the information on this renewal is true and correct. You will be required to complete education hours if applicable. This form will be returned if it is not correctly completed which will delay the renewal.

**Signature**

**Date**

---

**Date Expired**: 12/31/2001  
**Renewal Fee**: $150.00

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<th>LICENSE NUMBER</th>
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<td>PC10000010</td>
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**Robert Coulter**  
6900 Ferstel Rd  
Newburgh IN 47630

**Amount Paid**: $150.00  
**Date**: MAY 14 2008
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Address: Issue Date: 06/07/1996
Detail: Obtained By: Examination
Supp Info: From State Prov:
Expiration Date: 12/31/2001
Additional: Date This Status: 12/31/2003
Reason Changed: Terminated
Date Archived:
Effective Date: 06/07/1996
Last Renewal Date: 02/01/2000
Renewal ID:
Remarks:
### Licencee: Robert Coulter (Plumbing Commission)

#### General

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<th>Degree/Certificate</th>
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<th>Her/Credit</th>
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#### Exams

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<th>Candidate #</th>
<th>State</th>
<th>Score</th>
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<th>Method</th>
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Indiana Professional Licensing Agency

Applicant Examination/Licensing Cover Sheet

Name: Robert Cowler

Address: 6900 Ferstel Rd

City: Newburgh State: IN Zip: 47630

Passage of Examination

<table>
<thead>
<tr>
<th>Type of Examination</th>
<th>Date Passed</th>
<th>Exam Number</th>
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<tbody>
<tr>
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<tr>
<td>Contractor</td>
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Examination Information

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<th>Exam Number</th>
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<td>107</td>
<td>W/C/P/D/951</td>
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</tbody>
</table>

30
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:

<table>
<thead>
<tr>
<th>Date</th>
<th>Type</th>
<th>Candidate#</th>
<th>Score</th>
<th>Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>February 27, 2008</td>
<td>Copper Project</td>
<td>107</td>
<td>38</td>
<td>Pass</td>
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<tr>
<td>February 27, 2008</td>
<td>Soil Project</td>
<td>107</td>
<td>31</td>
<td>Fail</td>
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<tr>
<td>February 27, 2008</td>
<td>Written</td>
<td>107</td>
<td>58</td>
<td>Pass</td>
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<tr>
<td>February 27, 2008</td>
<td>Drawing</td>
<td>107</td>
<td>83</td>
<td>Pass</td>
</tr>
</tbody>
</table>

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
Robert Coulter  
6900 Ferstel Rd  
Newburgh IN 47630

March 6, 2008

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.

<table>
<thead>
<tr>
<th>Date</th>
<th>Type</th>
<th>Candidate#</th>
<th>Score</th>
<th>Results</th>
</tr>
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<tbody>
<tr>
<td>February 27, 2008</td>
<td>Copper Project</td>
<td>107</td>
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<td>Soil Project</td>
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<td>February 27, 2008</td>
<td>Drawing</td>
<td>107</td>
<td>83</td>
<td>Pass</td>
</tr>
</tbody>
</table>

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
INDIANA PLUMBING CONTRACTOR EXAMINATION SCORE SHEET

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

EXAMINATION SCORE PER SECTION

<table>
<thead>
<tr>
<th>Section</th>
<th>Points</th>
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<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
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<td>80</td>
<td>56</td>
<td>58</td>
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<tr>
<td>DRAWING</td>
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<td>40</td>
<td>60</td>
</tr>
<tr>
<td>COPPER</td>
<td>50</td>
<td>35</td>
<td>40</td>
</tr>
<tr>
<td>SOIL</td>
<td>50</td>
<td>35</td>
<td>31</td>
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</table>

M.C. WRITTEN (80 POINTS)

<table>
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</thead>
<tbody>
<tr>
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COPPER PROJECT - 50 POINTS

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<tr>
<td>Preparation</td>
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<td>Pressure Test</td>
<td>20</td>
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<td>TOTAL</td>
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SOIL PIPE PROJECT - 50 POINTS

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<tbody>
<tr>
<td>Pressure Test</td>
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<td>Number of Leaks</td>
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<td>Appearance</td>
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<tr>
<td>TOTAL</td>
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</tbody>
</table>

Initials ____________________

Initals ____________________
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
APPLICATION FOR PLUMBING CONTRACT EXAMINATION FOR LICENSING
State Form 22086 (R10 / 11-02)
Approved by State Board of Accounts, 2002

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 Ferster Rd Newburgh IN 47630
County: Warwick
Telephone number: 812-455-7614
Have you ever been convicted of a crime? (if "Yes", provide a copy of the court order and any pertinent documents)

☐ Yes ☐ No

INSTRUCTIONS:
1. 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).
2. 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 four (4).
3. 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: Bayers Plumbing
Address (number and street, city, state, ZIP code, county): 3820 Bell Oaks Dr Newburgh IN 47630 Warwick
Telephone number: 812-455-2305
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
Date of completion: Dec 1995
Signature of manager of approved apprenticeship program sponsor: 
Date signed: 5-24-07

NOTARY CERTIFICATE (completed by program sponsor)

STATE OF Indiana
COUNTY OF Warrick

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: Michael Bayer
Printed or typed name of manager of approved apprenticeship program sponsor: Michael Bayer
Date subscribed and sworn to Notary Public: 5-24-07

Signature of Notary Public: Jeffrey A. Stuckwisch
Printed or typed name of Notary Public: Jeffrey A. Stuckwisch
County of residence: Vanderburgh
Date commission expires: 3-28-2013

Page 1 (continued on page 2)
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:

<table>
<thead>
<tr>
<th>Name of employer</th>
<th>Plumbing contractor license number (if applicable):</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address (number and street, city, state, ZIP code)</td>
<td>PC</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>County</th>
<th>Telephone number</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Dates of employment (month, day, year): From</th>
<th>To</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Name of employer</th>
<th>Plumbing contractor license number (if applicable):</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address (number and street, city, state, ZIP code)</td>
<td>PC</td>
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</table>

<table>
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<tr>
<th>County</th>
<th>Telephone number</th>
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</table>

<table>
<thead>
<tr>
<th>Dates of employment (month, day, year): From</th>
<th>To</th>
</tr>
</thead>
</table>

**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 __________________________, for __________________________, for __________________________.

<table>
<thead>
<tr>
<th>Name of employer or licensed plumbing contractor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address (number and street, city, state, ZIP code)</td>
</tr>
</tbody>
</table>

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 __________________________

<table>
<thead>
<tr>
<th>SS:</th>
</tr>
</thead>
</table>

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.

<table>
<thead>
<tr>
<th>Signature of applicant</th>
<th>Signature of Notary Public</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Printed or typed name of applicant</th>
<th>Printed or typed name of Notary Public</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Date subscribed and sworn to Notary Public</th>
<th>County of residence</th>
<th>Date commission expires</th>
</tr>
</thead>
</table>

**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 period of __________________________ to __________________________.

<table>
<thead>
<tr>
<th>Signature of employer or licensed plumbing contractor</th>
<th>Name of company or plumbing business</th>
<th>Plumbing contractor license number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address (number and street, city, state, ZIP code)</td>
<td>Date signed</td>
<td></td>
</tr>
</tbody>
</table>

Licensees who submit false information may be subject to disciplinary action by the Indiana Plumbing Commission.
STATE OF ___________} SS:
COUNTY OF ___________

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.

<table>
<thead>
<tr>
<th>Signature of employer or licensed plumbing contractor</th>
<th>Signature of Notary Public</th>
</tr>
</thead>
<tbody>
<tr>
<td>Printed or typed name of employer or licensed plumbing contractor</td>
<td>Printed or typed name of Notary Public</td>
</tr>
<tr>
<td>Date subscribed and sworn to Notary Public</td>
<td>County of residence</td>
</tr>
</tbody>
</table>

**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).

<table>
<thead>
<tr>
<th>Name of licensed plumbing contractor</th>
<th>License number: PC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address (number and street, city, state, ZIP code)</td>
<td>Telephone number</td>
</tr>
<tr>
<td>County</td>
<td></td>
</tr>
<tr>
<td>Dates of employment (month, day, year): From</td>
<td>To</td>
</tr>
<tr>
<td>Name of licensed plumbing contractor</td>
<td>License number: PC</td>
</tr>
<tr>
<td>Address (number and street, city, state, ZIP code)</td>
<td>Telephone number</td>
</tr>
<tr>
<td>County</td>
<td></td>
</tr>
<tr>
<td>Dates of employment (month, day, year): From</td>
<td>To</td>
</tr>
</tbody>
</table>

**APPLICANT AFFIDAVIT OF EXPERIENCE IN PLUMBING BUSINESS**

I hereby certify that I, ____________________________, have worked in the ____________________________, Name of plumbing business ____________________________, under the direction of ____________________________, Name of licensed plumbing contractor, from ____________________________ 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
### Employer Affidavit of Experience in Plumbing Business

I hereby certify that ____________ has worked in the ____________ under the direction of ____________ from ____________ to ____________.

<table>
<thead>
<tr>
<th>Name of applicant</th>
<th>Name of plumbing business</th>
</tr>
</thead>
<tbody>
<tr>
<td>____________</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Address</th>
<th>Day and month</th>
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<tbody>
<tr>
<td>____________</td>
<td>____________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of licensed plumbing contractor</th>
<th>Plumbing contractor license number</th>
<th>Said license expiring</th>
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<tbody>
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<td>____________</td>
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</tbody>
</table>

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

### Notary Certificate (Completed by Licensed Plumbing Contractor)

I, ____________, 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.

<table>
<thead>
<tr>
<th>Signature of licensed plumbing contractor</th>
<th>Signature of Notary Public</th>
</tr>
</thead>
<tbody>
<tr>
<td>____________</td>
<td>____________</td>
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</table>

<table>
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<th>Printed or typed name of Notary Public</th>
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<table>
<thead>
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</thead>
<tbody>
<tr>
<td>____________</td>
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</table>

### Section Four (to be completed by all applicants)

I, ____________, 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.

<table>
<thead>
<tr>
<th>Signature of applicant</th>
<th>Signature of Notary Public</th>
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</thead>
<tbody>
<tr>
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<table>
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<tbody>
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</table>

Page 4
APPLICATION CHECKLIST

APPLICANT NAME: Robert Coulter

$30 FEE

AT LEAST 18 YEARS OF AGE

APPRENTICE LICENSE #: JP 29600221 EXPIRATION DATE 12/31/06

JOURNEYMAN LICENSE #: PL 16200010 EXPIRATION DATE 12/31/03

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 YES NO
  * 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 #
  * SECTION TWO AND APPLICATION NOTARIZED YES NO

☐ LENGTH OF EMPLOYMENT:
  EMPLROYER AFFIDAVITS: YES NO
  APPLICATION AFFIDAVITS: YES NO

☐ HAS A CONVICTION RECORD DOCUMENTATION ATTACHED:

☐ APPLICATION COMPLETE DOCUMENTATION REQUESTED

☐ 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 BAC program and does not have a current apprenticeship license.

COMMISSION SIGNATURE: E " " DATE: 1-23-08

COMMISSION SIGNATURE DATE: 1-23-08
<table>
<thead>
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<th>Test</th>
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<th>Test</th>
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</tbody>
</table>

**Record Card**

Department of Vocational and Adult Education

Evansville-Vanderburgh School Corporation
### Participants A & B

#### Participant A
- **Name:** Coulter, Bob
- **Address:** 7366 Brentwood
- **Phone:** 853-3115
- **Course:** Welding-Plumbers
- **City, St, Zip:** Newburgh, IN 47630
- **Fees:** $90.00
- **Time:** 6:30-9:30 Thursday
- **Employer:** Bayer
- **Instructor:** Larry Morris

<table>
<thead>
<tr>
<th>Date</th>
<th>Hr</th>
<th>Tt</th>
<th>Date</th>
<th>Hr</th>
<th>Tt</th>
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#### Participant B
- **Name:** Coulter, Robert
- **Address:** 8945 Andrea CT.
- **Phone:** 853-2305
- **Course:** PLUMBINGIII'94
- **City, St, Zip:** NEWBURGH, IN 47630
- **Time:** 6:30-9:30 P.M.
- **Employer:** NEILSON HEATING
- **Instructor:** Drew Swonder

<table>
<thead>
<tr>
<th>Date</th>
<th>Hr</th>
<th>Tt</th>
<th>Date</th>
<th>Hr</th>
<th>Tt</th>
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<td></td>
<td>3/30</td>
<td>3</td>
<td>3/30</td>
</tr>
</tbody>
</table>

#### Participant A's Report
- **Grade:** 92
- **Number Sessions:** 6
- **Number Attended:** 5
- **Comment:**

#### Participant A's Signature:
- **Date:** 1-27-94

#### Participant B's Report
- **Grade:** 92
- **Number Sessions:** 12
- **Number Attended:** 10
- **Comment:**

#### Participant B's Signature:
- **Date:** Sept 21 94

---

The above evaluations are private and confidential.
### Course: Motors Control

#### Date and Time
- **Date:** September 1st - September 9th, 1994
- **Time:** 6:30 AM - 9:30 PM

#### Work Log
<table>
<thead>
<tr>
<th>Date</th>
<th>Start Time</th>
<th>End Time</th>
<th>Task Description</th>
<th>Notes</th>
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<tbody>
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<td>Task 2</td>
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</tr>
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<td>9/3</td>
<td>6:30 AM</td>
<td>9:30 AM</td>
<td>Task 3</td>
<td></td>
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</tbody>
</table>

#### Weekly Progress

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<tr>
<th>Week</th>
<th>From Date</th>
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#### Instructor
- **Instructor:** Jerry Burdette

---

### Course: Prerogatives

#### Date and Time
- **Date:** September 1st - September 9th, 1994
- **Time:** 6:30 AM - 9:30 PM

#### Work Log
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#### Weekly Progress

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#### Instructor
- **Instructor:** Larry Frazee

---

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

**Signature:** [Signature]

**Date:** 9/15/94
Evansville-Vanderburgh School Corporation  
Department of Vocational and Adult Education  
Record Card

Name: COULTER, ROBERT  
Address:  
Course: PLUMBING I091493  
Cty, St, Zip:  
Time: 6:30-9:30  
Employer:  
Instructor: TODD JOHNS

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

Signature: [Signature]  
Date: 10-26-93

---

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

Name: COULTER, Rob  
Address: 7366 B Brentwood  
Course: Plumbing II-Independent  
Cty, St, Zip: Newburgh, IN 47630  
Time: 6:30-9:30  
Employer: Bayer's  
Instructor: Todd Johns

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

Signature: [Signature]  
Date: 1-25-94

45
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

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6 Week Reports | Date | % Grade | Number Sessions | Number Attended | Comment
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2nd | 3-9 | 4-20 | 85 | 6 | 6
3rd |       |       |       |       |       |
Final |       |       |       |       |       |

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

Signature: [Signature]
Date: 2-23-85

---

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

Name: COULTER, BOB
Address: 8945 ANDREA CT.
Phone: 853-5752

Course: PLUMBINGII95
Cty, St Zip: NEWBURGH, IN 47630
Fees:

Time: 6:30-9:30 P.M.
Employer:
Instructor: DREW SWONDER

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2nd | 3/8 | 4/19 | B- | 6 | 6
3rd |       |       |       |       |       |
Final |       |       |       |       |       |

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

Signature: [Signature]
Date: 2-15-85

46
Evansville-Vanderburgh School Corporation
Department of Vocational and Adult Education
Record Card

Name: COULTER, ROBERT
Address: 2944 P CAMP BESSEND
Course: PLUMBING95
Cty, St Zip: NEWBURGH, IN 47630
Time: 6:30-9:30
Employer: 
Instructor: C.R. WESSE

6 Week Reports
Date
% Grade
From
To
Number Sessions
Number Attended
Comment

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
Address: 2944 P CAMP BESSEND
Course: PLUMBING95
Cty, St Zip: NEWBURGH, IN 47630
Time: 6:30-9:30
Employer: 
Instructor: C.R. WESSE

6 Week Reports
Date
% Grade
From
To
Number Sessions
Number Attended
Comment

1st

2nd

3rd

Final

I, undersigned, give my permission for this evaluation to be released to my employer and/or advisory committee.
Signature: ___________________ Date: ____________

45
Evansville-Vanderburgh School Corporation  
Department of Vocational and Adult Education  
Record Card

Name: COULTER, BOB  
Address:  
Course: PLUMBINGIV25  
City, St Zip:  
Time: 6:30-9:30  
Employer:  
Instructor: MARK DILL

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

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

Signature  
Date 2-1-93

Name  Coulter, Bob  
Instructor  Johns, Todd

Class  Independent Plumbing  
Employer/JAC Bayer Plumbing

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

Signature  
Date 2-28-82

RECEIVED

JAN 14 2008

Indiana Professional Licensing Agency
## RECORD CARD

### Evansville-Vanderburgh School Corporation
Department of Vocational and Adult Education

**Name:** Robert Coulter  
**Phone:** 853-5752

**Address:** 2366 Crescent  
**Zip:** 47630

**City:** Henderson  
**State:** IN

**Employer:** Joseph Plumbing

**Occupation:** Appliance  
**Fee:**

**Course:** Independent Plumbing  
**Time:** 6:30-9:30

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**Instructor:** Todd Johns

---

### RECORD CARD

**Name:** Coulter, Bob  
**Phone:** 473-2677

**Address:** 5209 Plecent Ridge  
**Zip:** 47630

**City:** Newburgh  
**State:** IN

**Employer:** Mayer Plumbing

**Occupation:**  
**Fee:**

**Course:** Independent Plumbing  
**Time:** 6:30-9:30

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**Instructor:** Johns, Todd

---
### ROBERT COULTER

**Class:** ALGEBRA - PLUMBERS  
**Instructor:** JOHN SCHNEIDER

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

Signature: [Signature]  
Date: 10-15-92

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### Coulter, Robert

**Class:** First Aid  
**Instructor:** Buehler

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

Signature: [Signature]  
Date: 2-3-93

---

51
### Math Refresher

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

Signature ___________________________ Date ___________________________

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### Welding

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

Signature ___________________________ Date 1-23-92
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**Record Card**

Department of Vocational and Adult Education
Evanston-Vernon Hills School Corporation
## Expired Journeymen Plumber

**Please Circle Your Answer to All the Following Questions: Since You Last Renewed Your License (If Not, Please Attach Details of Action Taken)**

1. **Has any professional license certificate, registration, or permit been suspended, revoked, or denied to you by a court or professional licensing body?**
   - **Yes**
   - **No**

2. **Have you been convicted of a felony or a violation of a federal or state law or are criminal charges pending?**
   - **Yes**
   - **No**

3. **Are you on any federal, state, local, or other list of disbarred, suspended, or unethical contractors or persons?**
   - **Yes**
   - **No**

---

### A Note From C. Kneer

June 20, 2008

To Whom It May Concern:


Cathie O. Kneer
ISO 9001:2000 CERTIFIED

July 10, 2008

Angela Smith Jones
Indiana Department of Administration
Procurement Division
402 West Washington Street, Room W478
Indianapolis, Indiana 46204

Re: Development and Administration of the Indiana Journeyman Plumbing Examination and the Indiana Plumbing Contractor Examination.

Dear Angela Smith Jones,

Please accept this formal proposal for the development, maintenance, and administration of the Journeyman Plumber and Contractor Plumber examinations that were described in RFP 7-72 section one. It is our understanding that you are open to considering unsolicited proposals at this time.

The “National Inspection Testing Certification Corporation” (NITC) specializes in administering, maintaining, and developing examinations in the construction industry, particularly in the Plumbing and Piping Industry. NITC and IAPMO (International Association of Plumbing and Mechanical Officials) are strategic partners in this regard. IAPMO relies upon NITC for the test development, maintenance, and administration of its national code administration examinations. This allows IAPMO to assist in responding to the testing and licensing needs of its jurisdiction and agency members.

NITC is a highly respected testing agency having acquired the ISO 9001:2000 Quality Management System registration and accreditation of the ANSI ISO/IEC 17024 standard for bodies operating certification of personnel.

The following is for your consideration:

2.4 Technical Proposal
(1) NITC will develop an exam for Journeyman Plumber and Contractor Plumber utilizing the criteria in RFP 7-72 at a cost of $5000 per exam. These exams will be...
both computer based and paper/pencil. These exams will be designed with a two hour completion time frame. Computer based examinations will either be held at ACT or other testing facilities within Indiana. Computer based examinations can be held at testing facilities other than ACT as long as the testing facilities are equipped for computer based testing. In the event of testing at non ACT testing centers NITC will provide a qualified proctor.

The administration of the 90 question Journeyman Plumber examination shall cost $105 per exam.

The administration of the 76 question Plumbing Contractor examination shall cost $90 per exam.

(2) NITC shall develop the Journeyman Plumber examination and the Plumbing Contractor examination as specified in RFP 7-72.

(3) NITC shall ensure that all examinations conform to the requirements of all Indiana State laws, rules, and regulations that apply to administering examinations.

(4) NITC shall comply with administering examinations by computer or paper/pencil on the same day. NITC shall include 10 questions within the Journeyman Plumber examination and 20 questions within the Plumbing Contractor examination that pertain to Indiana licensing.

(5) NITC shall use the services of “ACT” computer based testing or a testing facility capable of having computer based testing administered. At the conclusion of the exam, the applicant can view his/her score and print out the results. A photo I.D. card will be mailed to the successful applicant within seven working days of the exam, providing an appropriate photo has been supplied.

(6) NITC shall develop a candidate bulletin for each examination that will be posted on our web site www.nationalitc.com and any other web site designated by the State of Indiana.

(7) NITC shall obtain the State’s approval for all Candidate Bulletins or any other information prior to posting on web sites.

(8) NITC shall deliver the following examination services:

   a. NITC shall establish an examination schedule.
b. NITC shall maintain and provide accurate information to the applicants and the state based on information furnished to NITC by the State of Indiana.

c. NITC shall be responsible for reviewing the eligibility of the applicant that is supplied by the applicant on his/her application. NITC will not be responsible for verifying eligibility other than that which is stated on the application.

d. NITC has the ability to offer at no extra charge through our online testing vendor examinations in the following languages: Chinese, French, German, Italian, Japanese, Korean, Polish, Portuguese, Russian, and Spanish. If the examination(s) is to be developed in paper/pencil format, the price is $5000 each and can only be developed in Spanish.

e. NITC uses "ACT testing centers. There are six (6) testing centers in Indiana, and others are available in the adjoining states. (Please visit: www.nationalitc.com)

f. NITC shall develop all examinations electronically and paper/pencil.

g. NITC has a toll free number (877-457-6482) and web site www.nationalitc.com that may be used for the purpose of scheduling appointments.

h. NITC shall collect fees from the candidates during the registration process. NITC accepts credit cards, personnel checks, and electronic checks.

i. NITC shall negotiate all potential rate increases with the State.

j. NITC shall provide immediate candidate score reports when taking the exams at ACT centers or other testing facilities, electronically. Paper/Pencil exams are mailed back to the NITC office, graded, and the results are mailed back to the applicant.

k. NITC complies with the federal ADA. See our web site www.nationalitc.com. Go to NITC Rules & Procedures (bottom left corner).

l. NITC shall e-mail a monthly report to the state with the information as outlined in (l).
m. NITC shall e-mail a monthly report to the apprenticeship program & state as outlined in (m).

n. NITC shall e-mail a monthly report to the apprenticeship program & state as outlined in (n).

o. NITC shall provide for candidate review of the appropriate examination in accordance with the guidelines mutually agreed upon by NITC and the State.

p. NITC shall answer all questions regarding the said examinations.

(9) NITC has complied with all requirements of the ANSI accreditation to ensure security and confidentiality of all applicants’ personal information.

(10) If awarded this contract, NITC shall administer for the State of Indiana, the plumbing licensing examinations and the state law licensing examinations.

(11) If awarded this contract, NITC shall provide computer based testing at ACT centers or other testing facilities equipped for computer based testing. This system includes on-site examination scoring at the conclusion of each exam. The successful examinee will be mailed a photo I.D. card within seven (7) days, providing the applicant has provided the proper photo to NITC. If awarded this contract, a customized insignia of the states choice can appear on the I.D. card if the State of Indiana so desires.

(12) If awarded this contract, NITC will have certification processors to answer any and all questions pertaining to the examinations. Information shall also be provided on the NITC web site at www.nationalitc.com.

NITC is looking forward to the opportunity to provide valid and reliable professional testing services that will represent the highly-regarded professionalism of the State of Indiana.

Thank you for considering National Inspection Testing Certification Corporation (NITC).

Sincerely,

Jarrod Ferruccio
National Business Development Representative

[Signature]

[Graphic of NITC logo]

National ITC Corporation
501 Shatto Place, Suite 201
Los Angeles, California 90020
(toll free) (877) 457-6482
(213) 380-6482
Fax (213) 382-2501
jarrod@nationalitc.com
www.nationalitc.com
BEFORE THE INDIANA PLUMBING COMMISSION
CAUSE NO. IPC 08-10

IN THE MATTER OF )
THE APPLICATION OF )
NATHAN BOUSMAN, )
JOURNEYMAN PLUMBER APPLICANT )

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

2. This notice is being provided to counsel for the Commission, Julie Alexander, Deputy Attorney General, Office of the Attorney General, Indiana Government Center South, 402 West Washington Street, 5th Floor, Indianapolis, Indiana 46204, telephone number (317) 234-4668.

3. The official cause number of this action is IPC 08-10.

4. This action is pending before the Commission on the Petitioner's petition for review of the Commission's denial of licensure as a journeyman plumber because of examination failure.

5. A hearing regarding this matter will be held on the 23rd day of July, 2008, at 11:00 p.m., local time, in the Gerald H. Quigley Conference Room of the Indiana Professional Licensing Agency, Indiana Government Center South, 402 West Washington Street, Room W072, Indianapolis, IN 46204.

6. The Commission is empowered to hear this matter pursuant to the authority of IC 4-21.5-3 and IC 25-28.5.

7. The Commission will be presiding as the 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 Street, 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 involved in the denial of licensure as a journeyman plumber because of examination failure as more fully described in the Commission's notice.
of denial, a copy of which is attached hereto as Exhibit “A”, and the Petitioner's petition for review, a copy of which is attached hereto as Exhibit “B”.

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 IC 4-21.5-3-24.

All of which is ORDERED, ADJUDGED AND DECREED this 05 day of June, 2008.

Frances L. Kelly
Executive Director
Indiana Professional Licensing Agency
cc:

Nathan Bousman  
C/o Bill Stokes Plumbing  
499 South State Road 267  
Avon, IN 46123  
CERTIFIED MAIL NO.: 7006 2760 0003 4667 2833

Julie Alexander  
Deputy Attorney General  
Office of the Attorney General  
Indiana Government Center South  
402 W. Washington Street, 5th Floor  
Indianapolis, Indiana 46204
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:

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<td>Fail</td>
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<tr>
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<td>Soil Project</td>
<td>205</td>
<td>45</td>
<td>Pass</td>
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<td>69</td>
<td>Fail</td>
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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
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
19 May 2008

Brent F. Smith
26453 Hummingbird Drive
South Bend, IN 46619

Indiana Professional Licensing Agency
Indiana Plumbing Commission
402 W. Washington Street, Room W072
Indianapolis, IN 46204

Dear Plumbing Commission Board:

I am filing a petition for review of my written exam taken on May 7, 2008.

I have taken the test five times. Now I find that I have been studying from a 1996 UPC Code Book. I ordered the 1999 edition from The Architects Book Store. Allowing me to review my exam and studying from a current code book will help me to get a passing score. I plan to take my next test in July.

Sincerely,

[Signature]

Brent Smith
BFS Plumbing
14 July 2008

Brent F. Smith
26453 Hummingbird Drive
South Bend, IN 46619

Indiana Professional Licensing Agency
Indiana Plumbing Commission
402 W. Washington Street, Room W072
Indianapolis, IN 46204
ATTN: Lorrie Ruble

Dear Plumbing Commission Board:

I wish to withdraw my request to petition for review of my written exam taken on May 7, 2008.

Sincerely,

Brent Smith
BFS Plumbing
BEFORE THE INDIANA
PLUMBING COMMISSION
CAUSE NO. IPC 08-09

IN THE MATTER OF
THE APPLICATION OF
DANIEL J. HRASCH,
JOURNEYMAN PLUMBER
APPLICANT

ADMINISTRATIVE LAW JUDGE’S ORDER

Comes now, John Van Cleve, the Administrative Law Judge designated by the Commission in this proceeding, and hearing having been held, now issues and files his order. Notice is hereby given that any objection to the Administrative Law Judge’s Order must be filed with the Commission, identifying the basis of the objection with reasonable particularity, no later than eighteen days from the date of issuance of this order unless such date is a Saturday, a Sunday, a legal holiday under state statute or a day that the Indiana 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, a Sunday, a legal holiday under state statute or a day that the Indiana Professional Licensing Agency’s offices are closed during regular business hours. This Administrative Law Judge’s Order is not the final order of the Commission in this proceeding. However, in the absence of any objection, the Commission either will affirm the Administrative Law Judge’s Order as its final order or will serve notice of its intent to review any issue related to the Administrative Law Judge’s Order.

FINDINGS OF FACT

1. This proceeding is pending on Daniel J. Hrasch’s (hereinafter "Petitioner") petition for review of the Commission’s denial of licensure as a Journeyman Plumber because of examination failure.

2. The Petitioner failed to pass the written portion of the plumbing journeyman examination.


4. The Petitioner presented evidence on exam questions he felt were correct.

5. The Administrative Law Judge reviewed the questions and now finds that the questions and evidence submitted by Petitioner was not sufficient evidence of correct answers to render the Petitioner as having passed the exam.

CONCLUSIONS OF LAW

1. One of the requirements for licensure as a journeyman plumber is the passing of an examination as stated in IC 25-28.5-1-15. In 860 IAC 1-3, the Commission has adopted various rule provisions applicable to examinations. 860 IAC 1-3-1 is particularly applicable and reads as follows:

   (a) The journeyman plumber examination shall consist of a practical section and of a written section.
(b) The practical section of the examination shall include two (2) parts known as the following:
   (1) The copper pipe project.
   (2) The soil pipe project.

(c) The written section of the examination shall be a multiple-choice test.

(d) In order to pass the practical section of the examination, an individual must obtain scores of at least seventy percent (70%) on both of the following:
   (1) The copper pipe project.
   (2) The soil pipe project.

(e) An individual must obtain a score of at least seventy percent (70%) on the multiple-choice test in order to pass the written section of the examination.

2. The Petitioner did not pass the written sections of the examination as required by 860 IAC 1-3-1.

ORDER

IT IS HEREBY ORDERED, ADJUDGED AND DECREED that the Petitioner's application for licensure as a journey plumber is DENIED.

ISSUED this _8__ day of __July__, 200__.

[Signature]

John Van Cleve
Administrative Law Judge
Indiana Plumbing Commission

Copies to:

Daniel J. Hrasch
5231 Sherwin Avenue
Portage, in 46368

Sent by Certified Mail No. 7006 2760 0003 4664 5004
RETURN RECEIPT REQUESTED
IPC 08-09
Daniel J. Hrasch
5231 Sherwin Avenue
Portage, IN 46368

PS Form 3811, February 2004
Domestic Return Receipt
100295-02-M-1540

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

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

Postage $...
Certified Fee
Return Receipt Fee
(Endorsement Required)
Restricted Delivery Fee
(Endorsement Required)

IPC 08-09
Daniel J. Hrasch
5231 Sherwin Avenue
Portage, IN 46368

PS Form 3800, August 2006
See Reverse for Instructions
May 23, 2008

John T. Young  
Young Plumbing  
3426 N. Lake Park Ave.  
Hobart, IN 46342

Dear Mr. Young:

The Indiana Plumbing Commission reviewed the information and supporting documentation contained within the application of Mr. Daniel Hrasch.

Upon review of the submitted documentation, the commission is requesting that you provide a list of all employees and their license numbers to the commission. Please have this information submitted to the commission two weeks from the date of the letter.

Should you have any questions regarding this matter, please contact our office via email at pla10@pla.IN.gov or by telephone at (317) 234-3022.

Sincerely,

Angela Smith Jones  
Director  
Indiana Plumbing Commission
BEFORE THE INDIANA PLUMBING COMMISSION
CAUSE NO. IPC 08-09

IN THE MATTER OF
THE APPLICATION OF
DANIEL J. HRASCH,
JOURNEYMAN PLUMBER
EXAMINATION APPLICANT

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 Petitioner, Daniel J. Hrasch, 5231 Sherwin Avenue, Portage, IN 46368.

2. This notice is being provided to counsel for the Commission, Julie Alexander, Deputy Attorney General, Office of the Attorney General, Indiana Government Center South, 402 West Washington Street, 5th Floor, Indianapolis, Indiana 46204, telephone number (317) 234-4668.

3. The official cause number of this action is IPC 08-09.

4. This action is pending before the Commission on the Petitioner's petition for review of the Commission's denial to sit for the journeyman plumber examination.

5. A hearing regarding this matter will be held on the 28th day of May, 2008, at 2:40 p.m., local time, in the Gerald H. Quigley Conference Room of the Indiana Professional Licensing Agency, Indiana Government Center South, 402 West Washington Street, Room W072, Indianapolis, IN 46204.

6. The Commission is empowered to hear this matter pursuant to the authority of IC 4-21.5-3 and IC 25-28.5.

7. John Van Cleve is the administrative law judge designated by the Commission 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 Street, 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 involved in the denial to sit for the journeyman plumber examination as more fully described in the Commission's notice of denial, a copy of which is
attached hereto as Exhibit “A”, and the Petitioner's petition for review, a copy of which is attached hereto as Exhibit “B”.

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 IC 4-21.5-3-24.

All of which is ORDERED, ADJUDGED AND DECREED this 01 day of May, 2008.

Frances L. Kelly
Executive Director
Indiana Professional Licensing Agency

Daniel J. Hrasch
5231 Sherwin Avenue
Portage, IN 46368

Julie Alexander
Deputy Attorney General
Office of the Attorney General
Indiana Government Center South
402 W. Washington Street, 5th Floor
Indianapolis, Indiana 46204

cc:

Daniel J. Hrasch
5231 Sherwin Avenue
Portage, IN 46368

CERTIFIED MAIL NO.: 7006 2760 0003 4668 0258
Daniel J Hrasch  
5231 Sherwin Avenue  
Portage IN 46368

January 25, 2008

Dear Daniel J Hrasch:

The Indiana Plumbing Commission considered your Journeyman Plumber application at their January 23, 2008 meeting. It was the decision of the Commission to deny your application pursuant IC 25-28.5-1-12(c) and 860 IAC 1-1-9.

The Commission has determined that you failed to provide evidence of the following:

(a) Evidence of successfully completing at least four (4) years in an apprenticeship program approved by the Commission.

Please be advised that if you desire administrative review of the denial of this application, you must file a written petition for review at the above address with the Indiana Plumbing Commission, stating the reason for review. As the petitioner, you would have the burden of proving, in an administrative hearing, that the decision to deny your application for licensure 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, legal holiday under state statute that 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 proceeding will be conducted by an administrative law judge of the Indiana Plumbing Commission.

Sincerely,

[Signature]

Sylvia S. Grinstead  
Case Manager  
Indiana Plumbing Commission

Certified Mail No.: 7002 3150 0003 3036 2689
Dear Ms. Sylvia S. Grinstead:

My name is Dan Hrasch. I am writing this letter to gain permission to take the test for my Indiana State Plumbing License. As you will read, I have fulfilled all necessary requirements as stated by the Indiana State Plumbing Licensing Committee. My application, however, has gone through quite a fastidious, albeit understandable, inspection by your Commission, preventing my much desired approval. I am currently employed at Young Plumbing as a service technician, and over the past few years, I have seen my fellow employees, one by one, receive their letters of approval from the IPLA, allowing them to ultimately procure their licenses. My continuing denials have become a theme for comedy amongst my colleagues, as my credentials and applicable experience would seem to be more than enough to gain approval, but nonetheless, I remain, as it were, the last man standing. My only solace is in the possibility that certain aspects of my application must have been overlooked, and I intend to fully justify my qualifications in accordance with all IPLA requirements. I am confident that all previous rejections will be reviewed under these terms, and that I will finally be granted permission to take the test.

In my most recent rejection letter, dated January 25, 2008, the IPLA listed two statutes by which my application was judged, and ultimately denied my application by a rule that is counterintuitive to those very dictates. The Commission denied my application on the sole reason that I failed to provide evidence that I completed four (4) years experience in an approved apprenticeship program. It is no secret that I do not fulfill this requirement. However, the Commission cited Article 860 IC 25-28.5-1-12(c), which clearly states two options that can lead to approval - that being the applicant’s completion of a four (4) year apprenticeship program, or four (4) years of experience in the plumbing trade, as proven by a notarized statement. Furthermore, Article 860 IAC 1-1-9, also cited in my rejection letter, continues to tout the validity of my case, by enumerating in provisions (d) and (e) which detail of both viable options - that being the apprenticeship route and the plumbing experience route. That being said, it is clear that my application was reviewed under the pretenses of my qualifications in regards to apprenticeship route, rather than my qualifications in regards to the plumbing experience route.
I know that the application process is not a comparative procedure, and it is not fair to assume that I would receive acceptance simply because my (seemingly less qualified) co-workers were able to gain approval on their applications. Whereas this is a concern of mine, I am reassured that my argument can be completely justified specifically by its adherence to the codified terms by which my application was submitted. Specifically speaking, if you review my application, you will see that my original submission clearly showed, with W2 form evidence, that I had more than the required four (4) years of plumbing experience. The IPLA then requested a notarized statement (as detailed in 860 IAC 1-1-9), which I supplied. It was the completion of this request that should have resulted in my approval. As you may have guessed, I was disheartened and nonplussed when I received notice that my application was denied under seemingly an entirely new set of rules. Surely it can be seen that my application and all subsequent submissions of W2 forms and notarized letters were aimed at qualifying my four (4) years of plumbing experience. It is my sincere hope that anyone that would have denied my application on the grounds that I have not completed four (4) years of an apprenticeship program must have been missing a significant portion of my file, which trails back more than two years.

All I ask is that you once again review my application under the terms that I have outlined above. I have fully met all requirements as stated in the bylaws of the IPLA, and I have fully complied with all transmissions requested by the IPLA over the years. If a member of the Commission is presented with this information, I see no plausible reason for rejection, including the rationale in my recent (and assumed accidental) denial.

I have the utmost respect for the Indiana Professional Licensing Agency, my local union hall, and my current employer. I have dedicated my life to the trade of plumbing, and have used this passion to provide for my wife and children. All I ask is for a chance — a chance that I have earned. I thank you very much for your consideration, and anxiously await your response.

Sincerely,

[Signature]

Dan Hrasch

RECEIVED

FEB 08 2008

Indiana Professional Licensing Agency
IN THE MATTER OF
JEREMY DYKHIUZEN,
JOURNEYMAN PLUMBER
EXAMINATION APPLICANT.

BEFORE THE INDIANA
PLUMBING COMMISSION
CAUSE NO. IPC 08-08

ADMINISTRATIVE LAW JUDGE'S ORDER

Comes now, John Van Cleve, the Administrative Law Judge designated by the
Commission in this proceeding, and hearing having been held, now issues and files his order.
Notice is hereby given that any objection to the Administrative Law Judge's Order must be filed
with the Commission, identifying the basis of the objection with reasonable particularity, no later
than eighteen days from the date of issuance of this order unless such date is a Saturday, a
Sunday, a legal holiday under state statute or a day that the Indiana 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, a Sunday, a legal holiday under state statute or a day
that the Indiana Professional Licensing Agency's offices are closed during regular business hours.
This Administrative Law Judge's Order is not the final order of the Commission in this
proceeding. However, in the absence of any objection, the Commission either will affirm the
Administrative Law Judge's Order as its final order or will serve notice of its intent to review any
issue related to the Administrative Law Judge's Order.

FINDINGS OF FACT

1. This proceeding is pending on Jeremy Dykhuizen's (hereinafter "Petitioner")
petition for review of the Commission's denial of admittance to the examination
for a journeyman plumber.

2. The petitioner does have the required four years of apprenticeship and his
experience qualified as an exemption to the requirement for four years of
apprenticeship.

3. The Petitioner appeared in person and without counsel at the May 28, 2008
hearing.

4. The Petitioner did present sufficient evidence to make a showing of having
completed four years of a Board approved apprenticeship program per the
exemption provided by Indiana Code 25-28.5-1-12.

CONCLUSIONS OF LAW

1. IC 25-28.5-1-12 states that to qualify for a journeyman plumber examination an
applicant who is an Indiana resident must provide evidence that the applicant has
completed at least four (4) years in an apprenticeship program approved by the
commission or present to the commission a notarized statement providing
evidence that the applicant has at least four (4) years of experience in the
plumbing trade in employment as the following:
(1) An authorized employee of the United States, the state, or a political subdivision of the state if the employee does not profess to be for hire and is acting within the scope of the employee's employment.

(2) Construction, alteration, improvement, or repair of a plumbing system, located on a site, the title of which is in the name of the United States of America, or to construction, alteration, improvement, or repair on a project where federal law supersedes this article.

(3) An individual who is employed or acts as a maintenance person at the individual's place of employment.

ORDER

IT IS HEREBY ORDERED, ADJUDGED AND DECREED that the Petitioner's application for admittance to the Journeyman Plumbing examination is GRANTED.

ISSUED this 8th day of JUNE, 2005

John Van Cleve
Administrative Law Judge
Indiana Plumbing Commission

Copies to:

Jeremy Dykhuizen
501 Creekside Drive, Apt. 308
Lowell, IN 46356

Sent by Certified Mail No. 7006 2760 0003 4664 5011
RETURN RECEIPT REQUESTED
**SENDING 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.

**ARTICLE ADDRESSED TO:**

IPC 08-08  
Jeremy Dykhuizen  
501 Creekside Drive, Apt 308  
Lowell, IN 46356

**COMPLETING THIS SECTION ON DELIVERY**

- **A. Signature:**
  - [Signature]
  - [Agent]
  - [Addressee]

- **B. Received by (Printed Name):**
  - [Name]

- **C. Date of Delivery:**
  - [Date]

- **D. Is delivery address different from item 1?**
  - [Yes]
  - [No]
  - [If YES, enter delivery address below:]

**SERVICE TYPE**

- [Certified Mail]
- [Express Mail]
- [Registered]
- [Return Receipt for Merchandise]
- [Insured Mail]
- [C.O.D.]

**RESTRICTED DELIVERY? (Extra Fee)?**

- [Yes]
- [No]

**PS Form 3811, February 2004**

**Domestic Return Receipt**

**U.S. Postal Service™**

**CERTIFIED MAIL® RECEIPT**

**Domestic Mail Only; No Insurance Coverage Provided**

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

**Stamps**

- $[
- $[
- $[

**Return Receipt Fee (Endorsement Required):**

**Restricted Delivery Fee (Endorsement Required):**

**Postage:**

- [Stamp]

**Certified Fee:**

- [Stamp]

**Return Receipt Fee (Endorsement Optional):**

**Restricted Delivery Fee (Endorsement Optional):**

**Postmark Info:**

- [Postmark]

**FP 08-08**

**Jeremy Dykhuizen**

**501 Creekside Drive, Apt 308**

**Lowell, IN 46356**

**PS Form 3800, August 2006**
DEAR WILLIAM NAVE

THIS IS TO INFORM YOU THAT DAN REUILLE DOES NOT EMPLOY ANYBODY, DAN WORKS FOR ME. THOMAS A REUILLE PC1062988.

THE GENTLEMAN THAT HE SIGN A FORM FOR BEING ABLE TO TAKE THE STATE PLUMBING EXAM, DOES NOT WORK FOR ME. HE USED TO WORK FOR ME AND WAS IN THE APPRENTICE TRAINING PROGRAM. HE WAS TOLD BY A [SYLVIA S. GRINESTATE] A CASE MANAGER FOR THE INDIANA PLUMBING COMMISSION, THAT SHE WOULD SEND HIM THE FORM FOR THE EXAM AND FOR HIM TO FILL IT OUT AND HAVE IT SIGN BY A PERSON HAVING A CONTRACTORS LICENSE, FORMER EMPLOYER OR A SUPERVISOR.

THAT IF HE HAD A MINIMUM OF FOUR YEARS EXPERIENCE, HE COULD TAKE THE EXAM.

DAN REUILLE IS LICENSED AND ALSO USED TO BE HIS SUPERVISOR WHEN HE WORK FOR ME.

I HAD DAN SIGN THE FORM BECAUSE I WAS OUT OF TOWN THE DAY IT NEEDED TO BE SIGNED.

WE HAVE [NO] PLUMBERS WORKING FOR US THAT ARE NOT LICENSED.

THE LIST IS:

THOMAS A. REUILLE PC1062988
DAN REUILLE PC19700189
TIM REUILLE JP29600129
BENJAMIN NIMAN PA20500110

SINCERELY,

Thomas A. Reuille

THOMAS A. REUILLE
OWNER
ALERT PLUMBING
6-14-2008
May 29, 2008

Dan Reuille
12912 Branstrator Road
Yoder IN 46798

RE: PC19700189, Active

Re: Examination Licensure and Unlicensed Practice

Dear Dan Reuille:

An application for the plumber contractor or journeyman plumber examination for licensing was submitted to the Indiana Plumbing Commission ("Commission"). In the application, you and the applicant both signed a notarized affidavit stating that the applicant has obtained at least four (4) years of experience in the plumbing trade under your employment and supervision. Upon review of the application, it appears that you, as the employer, allowed the applicant to work in the plumbing trade without the applicant being licensed as a journeyman plumber or plumbing contractor or registered as an apprentice; therefore, the applicant’s application has been tabled. **You must immediately stop allowing unlicensed employees to perform plumbing work.**

According to Indiana Code 25-28.5-1-11, it shall be unlawful for *any person* to act in the capacity of a plumbing contractor or journeyman plumber within this state without first *obtaining a license as a plumbing contractor or journeyman plumber from the Commission*. In addition, 860 IAC 1-5-5(a) provides that plumbing contractors *shall not allow* any employee or subcontractor to act in the capacity of a plumbing contractor or journeyman plumber *unless that employee or subcontractor has a plumbing contractor’s license or a journeyman plumber’s license*. A licensing violation such as this could result in disciplinary action, which includes a range of action from a letter of reprimand to revocation of your plumbing contractor’s license. You have twenty (20) days from the date of this letter to respond, in writing, to the Compliance Division. The letter must address the allegations and your proposed compliance offer, which must include the following:

(a) Your intent and plan to become compliant with the Commission’s licensing requirements.
(b) A statement of understanding of the Indiana plumbing statutes and rules.
(c) A list of all principals and employees who engage in the practice of plumbing and their job descriptions.
(d) Filing applications for all employees who meet the requirements for admission to the journeyman plumber or plumbing contractor examination.
(e) Filing applications for apprentice registration for all employees who do not meet the requirements for admission to the journeyman plumber or plumbing contractor examination.
(f) As an alternative to subsections (d) and (e), you may file a statement indicating that you, as the employer, will permanently cease and desist from allowing unlicensed employees to engage in plumbing work.

A current copy of the Indiana Plumbing Commission statutes and rules are available at our website at www.in.gov/pla/bandc/plumbing. You can view the list of approved apprenticeship schools at the Commission's website, click on license express, then license search and click here to search for a Corporation, Shop, Business or Tobacco Retailer instead of a person and then chose from the list the Professions, and click license type:, and then search all.

If you have any questions, please feel free to contact me at (317) 232-5887 or email me at wnav@pla.in.gov.

Sincerely,

[Signature]

William Nave
Director of Compliance

Enclosure

Certified Mail: 7002 0860 0000 8020 9028
APPLICATION CHECKLIST

APPLICANT NAME: Troutman, Jeffrey

$30 FEE
AT LEAST 18 YEARS OF AGE
APPRENTICE LICENSE # NA
JOURNEYMAN LICENSE # NA
EXPIRATION DATE
EXPIRATION DATE

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 #: BC 19700189
  * PLUMBING CONTRACTOR LICENSE #: NA
  * SECTION TWO AND APPLICATION NOTARIZED ☐ YES ☐ NO

LENGTH OF EMPLOYMENT: 7 yrs + 8 mos. EXPERIENCE TOTALS AT LEAST 4 YEARS? ☐ YES ☐ NO

EMPLOYER AFFIDAVITS ☐ YES ☐ NO
APPLICATION AFFIDAVITS ☐ YES ☐ NO

HAS A CONVICTION RECORD? ☐ YES ☐ NO
DOCUMENTATION ATTACHED

APPLICATION COMPLETE
APPLICATION NOTARIZED

ADDITIONAL SUPPORTING DOCUMENTATION

COMMISSION ACTION SECTION

☐ APPROVED
TABLED, PENDING RECEIPT OF THE FOLLOWING: IC 25-28.5-1-12
SEND CONTRACTOR LEAHER ON APPRENTICE LICENSE
NO PROOF OF COMPLETION APPRENTICESHIP PROGRAM

☐ DENIED
REASON FOR DENIAL: STATUTE IC
RULE 860 IAC

COMMENTS:

COMMISSION SIGNATURE: Martinez J. Espinal DATE: 5-26-05
COMMISSION SIGNATURE
DATE
APPLICATION FOR JOURNEYMAN PLUMBER EXAMINATION FOR LICENSING

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

FEE: $30.00

ALL FEES ARE NON-REFUNDABLE AND NON-TRANSFERABLE.

Social Security number

Name of applicant: JEFFREY L. TROTMAN SR.
Date of birth (month, day, year): MAY 18, 1971
Address (number and street, city, state, ZIP code): 303 EAST MARTIN LANE, OSSIAN, IN, 46777
County: WELLS
Telephone number: 260-705-5726

Have you ever been convicted of a crime? (Yes or No) [ ] Yes [ ] No

INSTRUCTIONS:
1. 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).
2. 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

APPROVED APPRENTICESHIP PROGRAM SPONSOR CERTIFICATION OF COMPLETION

Name of apprenticeship program sponsor

Date of enrollment (month, year)

Date of completion (month, year)

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

Name of apprentice

Date of enrollment

Signature of manager of approved apprenticeship program sponsor

Date of completion

Date signed

NOTARY CERTIFICATE

STATE OF ________________________________
COUNTY OF ________________________________

I, ________________________________, having been duly sworn, do 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

Signature of Notary Public

Printed or typed name of manager of approved apprenticeship program sponsor

Printed or typed name of Notary Public

Date subscribed and sworn to Notary Public

County of residence

Date commission expires

MARCH 31, 2008

Page 1 of 3
### 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:

<table>
<thead>
<tr>
<th>Name of employer</th>
<th>Plumbing contractor license number (if applicable)</th>
</tr>
</thead>
<tbody>
<tr>
<td>ALERT Plumbing</td>
<td>C017000/89</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address (number and street, city, state, ZIP code)</th>
<th>County</th>
</tr>
</thead>
<tbody>
<tr>
<td>P.O. Box 485 ZANESVILLE IN 46799</td>
<td>WELLS</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Dates of employment (month, day, year) From</th>
<th>To</th>
</tr>
</thead>
<tbody>
<tr>
<td>AUGUST 9, 2000</td>
<td>MARCH 24, 2008</td>
</tr>
</tbody>
</table>

### APPLICANT AFFIDAVIT OF EXPERIENCE IN PLUMBING TRADE

I hereby certify that I, JEFFREY L TROUTMAN SR, have worked in the plumbing trade as defined in commission rule 860 IAC 1-1-9, for the period of 9, AUGUST, 2000 to 24, MARCH, 2008, for ALERT Plumbing, as Name of company or plumbing business.

<table>
<thead>
<tr>
<th>Name of employer</th>
<th>Address (number and street, city, state, ZIP code)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thomas A. Reville</td>
<td>P.O. Box 485 ZANESVILLE IN 46799</td>
</tr>
</tbody>
</table>

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: JEFFREY L TROUTMAN SR Date signed: 03/24/2008

### NOTARY CERTIFICATE

STATE OF IN
COUNTY OF WELLS

JEFFREY L TROUTMAN SR, having been personally before me, the undersigned Notary Public, in the State and County aforesaid, having been duly sworn, 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: JEFFREY L TROUTMAN SR Signature of Notary Public: Jody A Brodie

Printed typewritten name of applicant: JEFFREY L TROUTMAN SR Printed typewritten name of Notary Public: Jody A Brodie

Date subscribed and sworn to Notary Public: March 24, 2008 County of residence: WELLS Date commission expires: Sept. 13, 2009
### Employer Affidavit of Experience in Plumbing Trade

I hereby certify that [JEFFREY L TROUTMAN SR.](Name of applicant) has worked in the plumbing trade as defined in commission rule 860 IAC 1-1-9 for the period of **9, August, 2000** to **24, March, 2008**.

**Signature of employer or licensed plumbing contractor**: Daniel J. Reville  
**Name of company or plumbing business**: ALERT Plumbing  
**Plumbing contractor license number**: 1062987C/19700189

**Address (number and street), city, state, ZIP code**: PO Box 485, Zanesville, IN 43709

**Date signed**: March 26, 2008

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

### Notary Certificate

**STATE OF**: IN  
**COUNTY OF**: Wells  
**SS**:

I, Daniel J. Reville, 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**: Daniel J. Reville  
**Printed or typed name of employer**: DANIEL J. REVILLE

**Date subscribed and sworn to Notary Public**: March 26, 2008  
**County of residence**: Delaware  
**Date commission expires**: September 13, 2009

### Section 3 (to be completed by all applicants)

**STATE OF**: IN  
**COUNTY OF**: Wells  
**SS**:

I, JEFFREY L TROUTMAN SR, 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**: JEFFREY L TROUTMAN SR  
**Printed or typed name of applicant**: JEFFREY L TROUTMAN SR

**Date subscribed and sworn to Notary Public**: March 24, 2008  
**County of residence**: Wells  
**Date commission expires**: Sept. 13, 2009

---

**RECEIVED**  
Mar. 14, 2008  
Indiana Professional Licensing Agency
Jefferey L. Troutman, Sr.
303 East Morton Lane
Ossian IN 46777

May 29, 2008

Dear Jefferey L. Troutman, Sr.:  

Your application was tabled by the Indiana Plumbing Commission pending the following:

Proof of completion of an approved apprenticeship program.

Please return the requested documentation with a copy of this letter within sixty (60) days. If you have any questions, please contact me at (317) 234-3022, or pla10@pla.state.in.us.

Sincerely,

Sylvia S. Grinstead
Case Manager
Indiana Professional Licensing Agency
Compliance Division
402 West Washington Street Room W072
Indianapolis IN 46204

Ms. Ruble:

Per our conversation on June 5, 2008. The two persons who signed the applications alleging that I had falsified the application, in violation of Indiana Code.

Jason Sullivan, applicant and attestant Ronald Saudners were never employed by me, or under my supervision.

After speaking with my employee, he indicated that both Ronald Saudner and Jason Sullivan had been employed by Mr. Rooter of Johnson County for a period. As I shared with you on the phone I terminated my franchise with Mr. Rooter Corporation in 2002. I also left the employment of Mr. Rooter Johnson County shortly afterwards.

Further I would like to request that you pursue both of these individuals for the fraudulent use of my license on this application and to cease the use of that license for any reason or activity. I would request you take any appropriate action for these individuals performing plumbing without a license.

Justin Dorsey
President
dba Justin Dorsey Plumbing

cc William Nave
**FAX COVER SHEET**

**West Central Indiana Plumbing, INC.**  
D.b.a. Justin Dorsey Plumbing  
Indiana License Number CP19400079  
Office: 1963 State Road 256, Danville Indiana 46122  
Mailing: P.O. Box 296 Danville, Indiana 46122  
Phone Number: 317-745-4830  
Fax Number: 317-745-0041

<table>
<thead>
<tr>
<th>Send To:</th>
<th>From:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Indiana Professional Licensing</td>
<td>Justin Dorsey</td>
</tr>
<tr>
<td>Attention:</td>
<td></td>
</tr>
<tr>
<td>Mrs. Betty William-Date</td>
<td>6-6-2008</td>
</tr>
</tbody>
</table>

Fax Number: 317-232-3812

_Urgent _ Reply ASAP _Please Comment _ Please Review _ For Your Information

Total Pages: Including Cover Sheet: 2

Comments:
May 30, 2008

Justin Dorsey
Mr. Rooter Plumbing
1963 State Road 236
Danville IN 46122

RE: PC81062328, Active

Re: Examination Licensure and Unlicensed Practice

Dear Justin Dorsey/ Mr. Rooter Plumbing:

An application for the plumber contractor or journeyman plumber examination for licensing was submitted to the Indiana Plumbing Commission ("Commission"). In the application, you and the applicant both signed a notarized affidavit stating that the applicant has obtained at least four (4) years of experience in the plumbing trade under your employment and supervision. Upon review of the application, it appears that you, as the employer, allowed the applicant to work in the plumbing trade without the applicant being licensed as a journeyman plumber or plumbing contractor or registered as an apprentice; therefore, the applicant’s application has been denied. You must immediately stop allowing unlicensed employees to perform plumbing work.

According to Indiana Code 25-28.5-1-11, it shall be unlawful for any person to act in the capacity of a plumbing contractor or journeyman plumber within this state without first obtaining a license as a plumbing contractor or journeyman plumber from the Commission. In addition, 860 IAC 1-5-5(a) provides that plumbing contractors shall not allow any employee or subcontractor to act in the capacity of a plumbing contractor or journeyman plumber unless that employee or subcontractor has a plumbing contractor’s license or a journeyman plumber’s license. A licensing violation such as this could result in disciplinary action, which includes a range of action from a letter of reprimand to revocation of your plumbing contractor’s license.

You have twenty (20) days from the date of this letter to respond, in writing, to the Compliance Division. The letter must address the allegations and your proposed compliance offer, which must include the following:

(a) Your intent and plan to become compliant with the Commission’s licensing requirements.
(b) A statement of understanding of the Indiana plumbing statutes and rules.
(c) A list of all principals and employees who engage in the practice of plumbing and their job descriptions.
(d) Filing applications for all employees who meet the requirements for admission to the journeyman plumber or plumbing contractor examination.
(e) Filing applications for apprentice registration for all employees who do not meet the requirements for admission to the journeyman plumber or plumbing contractor examination.

90
(f) As an alternative to subsections (d) and (e), you may file a statement indicating that you, as the employer, will permanently cease and desist from allowing unlicensed employees to engage in plumbing work.

A current copy of the Indiana Plumbing Commission statutes and rules are available at our website at www.in.gov/pla/bandc/plumbing. You can view the list of approved apprenticeship schools at the Commission’s website, click on license express, then license search and click here to search for a Corporation, Shop, Business or Tobacco Retailer instead of a person and then chose from the list the Professions, and click license type:, and then search all.

If you have any questions, please feel free to contact me at (317) 232-5887 or email me at wnaven@pla.in.gov.

Sincerely,

William Nave
Director of Compliance

Enclosure

Certified Mail: 7002 0860 0000 8020 9066
APPLICATION CHECKLIST

APPLICANT NAME: 

Sullivan  Jason

IC 25-28 5-1-13

$30 FEE

AT LEAST 18 YEARS OF AGE

APPRENTICE LICENSE #  PA 200364

JOURNEYMAN LICENSE #  NJ 721025

EXPIRATION DATE  Renewal

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: 4yr

EMPLOYER AFFIDAVITS:  Yes  No

APPLICATION AFFIDAVITS:  Yes  No

HAS A CONVICTION RECORD

DOCUMENTATION ATTACHED

APPLICATION COMPLETE

APPLICATION NOTARIZED

ADDITIONAL SUPPORTING DOCUMENTATION

COMMISSION ACTION SECTION

☐ APPROVED

TABLED, PENDING RECEIPT OF THE FOLLOWING:

☐ DENIED

REASON FOR DENIAL:  STATUTE IC 25-28 5-1-12

RULE 860 IAC

COMMENTS: 80% WASTE FLUSH FOR ROOF DRAIN WASTE

COMMISSION SIGNATURE:  

DATE  5-28-08

COMMISSION SIGNATURE:  

DATE  

92
Objective

Seeking a career with roots and stability and opportunity.

Experience

Plumber

- Crew Leader
- Finishes, services, rough-ins, slabs

Apr 2008-current     Earl Grey Plumbing     Bargersville, IN

Aug 2007-Apr 2008     Kirkoff Mechanical     Indianapolis, IN

Plumber

- Commercial plumbing
- New construction/Renovation/Service
- Ordering
- Troubleshooting
- Crew Leader/Assistant Crew Leader (dependant on job)

Nov 2006-Aug 2007     JE Mechanical     Indianapolis, IN

Plumber

- Commercial plumbing
- New construction
- Renovation
- Service

Apr 2004-Oct 2004     Paul E. Smith     Plainfield, IN

New Construction Plumbing Apprentice

- New construction installation of water and sewer lines, fixtures, appliances, and gas lines/gas line receptacles
- Service repair

Nov 2001-Nov 2006     Mr. Rooter Plumbing     Franklin, IN

Plumber/Mechanic/Equipment Operator

- Service plumbing and warranty repairs
- Shop mechanic (maintenance on all shop vehicles and equipment/machines)
- Operation of track hoes, rubber tire hoes, diesel industrial jetters, kubotas, and trenchers
- Customer service
- Collections and calculating written estimates
- Diagnostic home inspections
- Went out of business

Feb 2001-Oct 2001  Earl Grey Plumbing  Bargersville, IN

**Plumbing Apprentice**

- New construction, service, and repair plumbing
- Ran gas lines
- Laid off due to lack of business

Feb 1996-June 1999  Ray's Plumbing Contractors  Jacksonville, FL

**Journeyman Pipe Layer**

- Duties included pipe laying, hill/tail man, shooting grade, rebuilding hydrants, gate and barrel valves, and emergency repairs of mains
- Heavy Equipment Operator
- Year and a half each of Apprenticeship and as a Journeyman Plumber

**Education**

2002-2003  Mechanical Trade School  Indianapolis, IN

- Plumbing, mathematics, plumbing history, code, diagnostics, blueprint reading, troubleshooting, safety, installation, and on-the-job training

1992-1993  Central Nine  Greenwood, IN

- Welding, ARC, MIG, TIG, and plasma cutting
Indiana Plumbing Commission
402 W. Washington St. Room W072
Indianapolis, IN 46204
Tel: (317) 234-3022
Fax: (317) 233-4236
Website: www.pla.in.gov

Governor Mitchell E. Daniels, Jr.

October 24, 2007

Jason Sullivan
50 Crestview Dr.
Greenwood IN 46143

INCOMPLETE NOTIFICATION

Upon review of your application for licensure in the State of Indiana, we have found that further evaluation cannot be performed until the following documents have been submitted.

Please submit a letter explaining why there is no apprenticeship license or schooling to go with your application.

It is your responsibility to see that proper documentation is received. Your immediate attention to this matter is greatly appreciated. If you have made arrangements for the documentation noted above to be sent to this office, please disregard this notice. When all documentation is received, the Indiana Plumbing Commission will review your file.

When a "notarized copy" is requested the notary must make the statement that this document is an exact copy of the original. Documents with just a notary seal will not be accepted.

**To promote better service, we ask that you also supply us with your email address.**

If you have any questions, please contact us by email at pla10@pla.IN.gov or by phone at (317) 234-3022.

Lorrie Ruble
Case Manager
APPLICATION FOR JOURNEYMAN PLUMBER EXAMINATION FOR LICENSING

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

FEE: $30.00

ALL FEES ARE NON-REFUNDABLE AND NON-TRANSFERABLE.

Social Security number *

* Your Social Security number is requested by this agency in accordance with IC 4-1-3-1. It is mandatory that it be given. Social Security numbers are made available to the Department of Revenue.

Name of applicant

Jason L. Sullivan

Date of birth (month, day, year)

09/10/75

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

56 Crestview Dr., Greenwood, IN 46143

County

Johnson

Telephone number

(317) 717-2079

Have you ever been convicted of a crime? (If "Yes", provide a copy of the court order and any pertinent documents)

☐ Yes ☒ No

INSTRUCTIONS:
1. 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).
2. 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

APPROVED APPRENTICESHIP PROGRAM SPONSOR CERTIFICATION OF COMPLETION

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


Telephone number


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


Date of enrollment (month, year)


Date of completion (month, year)


I hereby certify that

completely four (4) years of training in an approved apprenticeship program.

Date of enrollment

Signature of manager of approved apprenticeship program sponsor

Date of completion

Date signed

RECEIVED

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 manager of approved apprenticeship program sponsor

Printed or typed name of manager of approved apprenticeship program sponsor

Date subscribed and sworn to Notary Public

Signature of Notary Public

Printed or typed name of Notary Public

County of residence

Date commission expires

Indiana Professional Licensing Agency
302 W. Washington St., Rm. E034
Indianapolis, IN 46204-2700
(317) 232-2960
www.in.gov/pla

Page 1 of 3
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 [Date] to [Date].

Signature of employer or licensed plumbing contractor: [Signature]

Name of company or plumbing business: [Name]

Plumbing contractor license number: [Number]

Address (number and street, city, state, ZIP code): [Address]

Date signed: [Date]

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

STATE OF [State] COUNTY OF [County]

[Name of applicant] 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]

Printed or typed name of employer: [Name]

Date subscribed and sworn to Notary Public: [Date]

SECTION 3 (to be completed by all applicants)

STATE OF [State] COUNTY OF [County]

[Name of applicant] 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: [Signature]

Printed or typed name of applicant: [Name]

Date subscribed and sworn to Notary Public: [Date]

Signature of Notary Public: [Signature]

Printed or typed name of Notary Public: [Name]

Date commission expires: [Date]
Compliance Division
402 Washington Street, Room W072
Indianapolis, IN 46204
Attn: Mr. William Nave, Director of Compliance

June 25, 2008

Dear Mr. Nave,

I apologize for causing any issues related to following the rules and statutes of the Indiana Plumbing Commission. I was very involved in helping young men achieve journeyman plumbing status in Indiana early in my career as a licensed plumbing contractor; at that time I do not recall an apprentice license requirement. For a period of several years I was not involved in training apprentices, when I started to train my son I did look at the rules and had 2 misunderstandings at that time:

1. I understood clearly that the rules require a journeyman plumber license to do plumbing work without direct supervision while employed by a licensed plumbing contractor. I also understood that the rules require a contractor license in order to advertise and sell plumbing work that is performed by journeyman plumbers in your employ. I did not understand that there was a requirement for registration of apprentice plumbers as I did not do a good job of reading the details.

2. I read the requirements for applying for the journeyman’s test and noted the use of the notarized statement of experience as a qualification but did not understand that it was intended for people not specifically in the construction trade.

The items my response must include:
(a) I fully intend to become compliant with the Commission’s licensing requirements by properly registering David as an apprentice, which includes enrollment in the ABC apprentice training program in Fort Wayne, IN (I am currently working with Kaylene Smith of ABC, 260-441-9897 to accomplish this).
(b) I have read and reread the Indiana plumbing statutes and rules and believe I now have a good understanding of same.
(c) Robert Tippmann, principal, licensed plumbing contractor, and licensed journeyman, I am President and lead plumber on our projects; David Tippmann, principal, waiting to be a registered apprentice before resuming, apprentice plumber on our projects. The other two principals are my wife Dani Tippmann, who does no plumbing, and Joseph Tippmann currently deployed in Iraq and only acted as a helper from time to time in plumbing – he concentrates on heating and air. I have one part time employee Max Tippmann who acts as a helper.
(d) I do not have anyone who qualifies to take the journeyman or contractors exam at this time.
(e) I am in the process of preparing the application for David as a registered apprentice, as soon as I receive the apprenticeship agreement from ABC I will send in his completed application – I anticipate approximately one week.

Respectfully Submitted,

Robert Tippmann, President
Tippmann Heating and Air LLC
ROBERT T. TIPPMANN, JR
130 EAST 400 SOUTH
COLUMBIA CITY IN 46725

RE: PC19600057, Active

Re: Examination Licensure and Unlicensed Practice

Dear ROBERT T. TIPPMANN, JR:

An application for the plumber contractor or journeyman plumber examination for licensing was submitted to the Indiana Plumbing Commission ("Commission"). In the application, you and the applicant both signed a notarized affidavit stating that the applicant has obtained at least four (4) years of experience in the plumbing trade under your employment and supervision. Upon review of the application, it appears that you, as the employer, allowed the applicant to work in the plumbing trade without the applicant being licensed as a journeyman plumber or plumbing contractor or registered as an apprentice; therefore, the applicant’s application has been denied. You must immediately stop allowing unlicensed employees to perform plumbing work.

According to Indiana Code 25-28.5-1-11, it shall be unlawful for any person to act in the capacity of a plumbing contractor or journeyman plumber within this state without first obtaining a license as a plumbing contractor or journeyman plumber from the Commission. In addition, 860 IAC 1-5-5(a) provides that plumbing contractors shall not allow any employee or subcontractor to act in the capacity of a plumbing contractor or journeyman plumber unless that employee or subcontractor has a plumbing contractor’s license or a journeyman plumber’s license. A licensing violation such as this could result in disciplinary action, which includes a range of action from a letter of reprimand to revocation of your plumbing contractor’s license. You have twenty (20) days from the date of this letter to respond, in writing, to the Compliance Division. The letter must address the allegations and your proposed compliance offer, which must include the following:

(a) Your intent and plan to become compliant with the Commission’s licensing requirements.
(b) A statement of understanding of the Indiana plumbing statutes and rules.
(c) A list of all principals and employees who engage in the practice of plumbing and their job descriptions.
(d) Filing applications for all employees who meet the requirements for admission to the journeyman plumber or plumbing contractor examination.
(e) Filing applications for apprentice registration for all employees who do not meet the requirements for admission to the journeyman plumber or plumbing contractor examination.

June 6, 2008
(f) As an alternative to subsections (d) and (e), you may file a statement indicating that you, as the employer, will permanently cease and desist from allowing unlicensed employees to engage in plumbing work.

A current copy of the Indiana Plumbing Commission statutes and rules are available at our website at www.in.gov/pla/bandc/plumbing. You can view the list of approved apprenticeship schools at the Commission’s website, click on license express, then license search and click here to search for a Corporation, Shop, Business or Tobacco Retailer instead of a person and then chose from the list the Professions, and click license type:, and then search all.

If you have any questions, please feel free to contact me at (317) 232-5887 or email me at wnavenave@pla.in.gov.

Sincerely,

William Nave
Director of Compliance

Enclosure

Certified Mail: 7002 3150 0003 3036 4706
June 4, 2008

Dear David A. Tippmann:

Your application was tabled by the Indiana Plumbing Commission pending the following:

Proof of completion of an approved apprenticeship program

Please return the requested documentation with a copy of this letter within sixty (60) days. If you have any questions, please contact me at (317) 234-3022, or pla10@pla.state.in.us.

Sylvia S. Grinstead
Case Manager
JOURNEYMAN

APPLICATION CHECKLIST

APPLICANT NAME: Tippman, David

IC 25-28.5-1-13

$30 FEE

AT LEAST 18 YEARS OF AGE

APPRENTICE LICENSE #

JOURNEYMAN LICENSE #

EXPIRATION DATE

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

☐ 4 YEARS EXPERIENCE IN PLUMBING TRADE (SECTIONS 2 AND 3)
  * ALL EXPERIENCE UNDER LICENSED PLUMBING CONTRACTOR(S)? YES NO
  * CORPORATE PLUMBING CONTRACTOR LICENSE #: PC19600057
  * PLUMBING CONTRACTOR LICENSE #: PC19600057
  * SECTION TWO AND APPLICATION NOTARIZED

LENGTH OF EMPLOYMENT: 4 YES

EMPLOYER AFFIDAVIT: YES

APPLICATION AFFIDAVIT: YES

☐ LAST CONVICTION RECORD

☐ DOCUMENTATION ATTACHED

☐ APPLICATION COMPLETE

☐ APPLICATION NOTARIZED

ADDITIONAL SUPPORTING DOCUMENTATION

COMMISSION ACTION SECTION

☐ APPROVED

TABLED, PENDING RECEIPT OF THE FOLLOWING:
ON APPRENTICE LICENSE IC 25-28.5-1-12 NO PROOF OF COMPLETION

SEND CONTRACTOR LEHNER

☐ DENIED

REASON FOR DENIAL: STATUTE IC

RULE 860 IAC

COMMENTS:

COMMISSION SIGNATURE: Martinez J. Bareyshel

DATE: 5-28-08

COMMISSION SIGNATURE

DATE
APPLICATION FOR JOURNEYMAN PLUMBER
EXAMINATION FOR LICENSING

ALL FEES ARE NON-REFUNDABLE AND NON-TRANSFERABLE.

Social Security number *

* 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: David A. Tippmann

Date of birth (month, day, year): 10-08-1985

Address (number and street, city, state, ZIP code): 7718 Westford Ct, Fort Wayne, IN 46835

County: Allen

Telephone number: (260) 610-3283

Have you ever been convicted of a crime? (if "Yes," provide a copy of the court order and any pertinent documents)

☐ Yes ☑ No

INSTRUCTIONS:
1. 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).
2. 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

APPROVED APPRENTICESHIP PROGRAM SPONSOR CERTIFICATION OF COMPLETION

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

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

Date of enrollment (month, year)

Date of completion (month, year)

I hereby certify that __________________________________________ Name of apprentice successfully completed four (4) years of training in an approved apprenticeship program.

Date of enrollment

Signature of manager of approved apprenticeship program sponsor

Date of completion

Date signed

NOTARY CERTIFICATE

STATE OF ____________________________ COUNTY OF ____________________________

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 manager of approved apprenticeship program sponsor

Signature of Notary Public

Printed or typed name of manager of approved apprenticeship program sponsor

Printed or typed name of Notary Public

Date subscribed and sworn to Notary Public

County of residence

Date commission expires

Page 1 of 3
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:

<table>
<thead>
<tr>
<th>Name of employer</th>
<th>Tippmann Heating &amp; Air LLC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address (number and street, city, state, ZIP code)</td>
<td>11400 Arcola Rd, Arcola IN, 46704</td>
</tr>
<tr>
<td>County</td>
<td>Allen</td>
</tr>
<tr>
<td>Telephone number</td>
<td>(260) 625-6680</td>
</tr>
</tbody>
</table>

Dates of employment (month, day, year):
From 4-1-04 To 4-1-08

Name of employer

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

County

Dates of employment (month, day, year):

APPLICANT AFFIDAVIT OF EXPERIENCE IN PLUMBING TRADE

I hereby certify that I, David A. Tippmann, have worked in the plumbing trade as defined in commission rule 860 IAC 1-1-9, for the period of 4-01-04 to 4-01-08 for Tippmann Heating & Air LLC.

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 4-3-08

NOTARY CERTIFICATE

STATE OF Indiana
COUNTY OF Allen

I, David A. Tippmann, 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 Notary Public

Printed or typed name of Notary Public

Date subscribed and sworn to Notary Public 4-3-08

Page 2 of 3
EMPLOYER AFFIDAVIT OF EXPERIENCE IN PLUMBING TRADE

I hereby certify that David A. Tippmann has worked in the plumbing trade as defined in commission rule 860 IAC 1-1-9 for the period of 4/1/2008 to 3/31/2008.

Name of applicant

Signature of employer or licensed plumbing contractor

Name of company or plumbing business

Plumbing contractor license number

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)

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

NOTE: The text is printed and handwritten. The handwriting is difficult to read in some places.
# PLUMBING CORPORATION

<table>
<thead>
<tr>
<th>License Number</th>
<th>Expiration Date</th>
<th>License Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>CO30300037</td>
<td>12/31/2009</td>
<td>Active</td>
</tr>
</tbody>
</table>

**TIPPMANN HEATING AND AIR LLC**

Tippmann Heating and Air LLC  
130 E 400 S  
Columbia City IN 46725

*Frances L. Kelly*  
Frances L. Kelly  
Executive Director  
Indiana Professional Licensing Agency

---

# PLUMBER CONTRACTOR

<table>
<thead>
<tr>
<th>License Number</th>
<th>Expiration Date</th>
<th>License Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>PC16600057</td>
<td>12/31/2009</td>
<td>Active</td>
</tr>
</tbody>
</table>

**ROBERT T. TIPPMANN, JR**  
130 EAST 400 SOUTH  
COLUMBIA CITY IN 46725

*Frances L. Kelly*  
Frances L. Kelly  
Executive Director  
Indiana Professional Licensing Agency
June 4, 2008

IPLA Compliance Division
Attn: William Nave
402 W Washington St, Room W072
Indianapolis, IN 46204

To Whom It May Concern:

Regarding the enclosed letter we received from you. We understand & agree with your Licensing Requirements, Plumbing Statues & Rules.

We sent a letter (of which I have enclosed), to the Indiana Plumbing Commission explaining the employment/apprentice school status of the applicant, Adam Wahl. There seems to be a misunderstanding that the applicant, Adam Wahl was/is employed without being enrolled in the apprenticeship program, which is incorrect information. As you can see by the highlighted areas of the enclosed letter, when Adam was in our employment, he was enrolled & attended the required apprentice training.

If further explanation or clarification is needed please call me & I will be glad answer any other questions or concerns you may have.

Thank you for your time & consideration in this matter

Sincerely,

Phil Schroering
Owner
March 20, 2008

Indiana Plumbing Commission
Attn: Kevin Moore, Case Manager

Re: Request to take Plumbing Test

I am contacting you, to request your consideration in allowing Adam Wahl to take the Journeyman Plumber examination.


He then began working for a Licensed Plumber in Indianapolis. The Plumbing Contractor with which he was working did not compensate for attending Plumbing Apprenticeship schooling, so he was not able to attend.


Adam is a very competent plumber & I am confident that he knows the Plumbing Codes quite well.

Adam has been performing Plumbing work, full time for almost 7 years & I feel very confident he deserves your consideration to take the Journeyman Plumber examination.

Thank you for your time & consideration in this matter.

Should you have any further questions or concerns, please feel free to contact me.

Sincerely,

Phil Schroering
Owner, Schroering Plumbing Indy, LLC
Phil Schroering
Schroering Plumbing, Heating & A/C, LLC
2145 South State Road 162
Jasper IN 47546

RE: PC88900130, Active

Re: Examination Licensure and Unlicensed Practice

Dear Phil Schroering:

An application for the plumber contractor or journeyman plumber examination for licensing was submitted to the Indiana Plumbing Commission ("Commission"). In the application, you and the applicant both signed a notarized affidavit stating that the applicant has obtained at least four (4) years of experience in the plumbing trade under your employment and supervision. Upon review of the application, it appears that you, as the employer, allowed the applicant to work in the plumbing trade without the applicant being licensed as a journeyman plumber or plumbing contractor or registered as an apprentice; therefore, the applicant's application has been denied. **You must immediately stop allowing unlicensed employees to perform plumbing work.**

According to Indiana Code 25-28.5-1-11, it shall be unlawful for any person to act in the capacity of a plumbing contractor or journeyman plumber within this state without first obtaining a license as a plumbing contractor or journeyman plumber from the Commission. In addition, 860 IAC 1-5-5(a) provides that plumbing contractors shall not allow any employee or subcontractor to act in the capacity of a plumbing contractor or journeyman plumber unless that employee or subcontractor has a plumbing contractor's license or a journeyman plumber's license. A licensing violation such as this could result in disciplinary action, which includes a range of action from a letter of reprimand to revocation of your plumbing contractor's license. You have twenty (20) days from the date of this letter to respond, in writing, to the Compliance Division. The letter must address the allegations and your proposed compliance offer, which must include the following:

(a) Your intent and plan to become compliant with the Commission's licensing requirements.
(b) A statement of understanding of the Indiana plumbing statutes and rules.
(c) A list of all principals and employees who engage in the practice of plumbing and their job descriptions.
(d) Filing applications for all employees who meet the requirements for admission to the journeyman plumber or plumbing contractor examination.
(e) Filing applications for apprentice registration for all employees who do not meet the requirements for admission to the journeyman plumber or plumbing contractor examination.
(f) As an alternative to subsections (d) and (e), you may file a statement indicating that you, as the employer, will permanently cease and desist from allowing unlicensed employees to engage in plumbing work.

A current copy of the Indiana Plumbing Commission statutes and rules are available at our website at www.in.gov/pla/bandc/plumbing. You can view the list of approved apprenticeship schools at the Commission's website, click on license express, then license search and click here to search for a Corporation, Shop, Business or Tobacco Retailer instead of a person and then chose from the list the Professions, and click license type:, and then search all.

If you have any questions, please feel free to contact me at (317) 232-5887 or email me at wnave@pla.in.gov.

Sincerely,

[Signature]

William Nave
Director of Compliance

Enclosure

Certified Mail: 7002 0860 0000 8020 9073
# Application for Journeyman Plumber Licensing

**State Form 40602 (R10 / 11-02)**

**Approved by State Board of Accounts, 2002**

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**FEE:** $30.00

---

**ALL FEES ARE NON-REFUNDABLE AND NON-TRANSFERABLE.**

---

**Social Security number:**

**Name of applicant:** Adam M. Wahl  
**Date of birth (month, day, year):** 2/29/1980  
**Address (number and street, city, state, ZIP code):** 1037 N 600 W Indianapolis IN 46255  
**County:** Hancock  
**Telephone number:** 812-661-0606

---

**Have you ever been convicted of a crime? (if "Yes", provide a copy of the court order and any pertinent documents):**  
- [ ] Yes  
- [x] No

---

**INSTRUCTIONS:**

1. **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).**
2. **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

**APPROVED APPRENTICESHIP PROGRAM SPONSOR CERTIFICATION OF COMPLETION:**

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:

<table>
<thead>
<tr>
<th>Name of apprenticeship program sponsor</th>
<th>Telephone number</th>
</tr>
</thead>
</table>

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

<table>
<thead>
<tr>
<th>Date of enrollment (month, year)</th>
<th>Date of completion (month, year)</th>
</tr>
</thead>
</table>

I hereby certify that

**Name of apprentice:** successfully

completed four (4) years of training in an approved apprenticeship program.

<table>
<thead>
<tr>
<th>Date of enrollment</th>
<th>Signature of manager of approved apprenticeship program sponsor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of completion</td>
<td>Date signed</td>
</tr>
</tbody>
</table>

---

## NOTARY CERTIFICATE

**STATE OF: **

**COUNTY OF:**

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.

<table>
<thead>
<tr>
<th>Signature of manager of approved apprenticeship program sponsor</th>
<th>Signature of Notary Public</th>
</tr>
</thead>
<tbody>
<tr>
<td>Printed or typed name of manager of approved apprenticeship program sponsor</td>
<td>Printed or typed name of Notary Public</td>
</tr>
<tr>
<td>Date subscribed and sworn to Notary Public</td>
<td>County of residence</td>
</tr>
</tbody>
</table>
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: Phil Schreuning
Address (number and street, city, state, ZIP code): 2145 S Rd Rd Jasper, IN 47546
County: Dubois

Name of employer: May Plumbing
Address (number and street, city, state, ZIP code): 11630 Oshawa St Indianapolis IN 46236
County: Marion

Applicant Affidavit of Experience in Plumbing Trade

I hereby certify that I, Adam M. Wahl, have worked in the plumbing trade as defined in commission rule 860 IAC 1-1-9, for the period of 11/23/04 - 9/15/06, for May Plumbing, the owner of May Plumbing - name of company or plumbing business.

Name of employer or licensed contractor: May Plumbing
Address (number and street, city, state, ZIP code): 11630 Oshawa St Indianapolis IN 46236

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):

I am no longer employed at May Plumbing, as I left to begin a new job. Therefore it would be quite difficult to obtain the signature. I have sent copies of this form.

Signature of applicant: Adam M. Wahl
Date signed: 4/24/08

Notary Certificate

STATE OF
COUNTY OF }

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 [Adam M Wahl] has worked in the plumbing trade as defined in commission rule 860 IAC 1-1-9 for the period of [6-7-01] to [1-1-03].

**Signature of Employer or Licensed Plumbing Contractor**: [Phil Schroering]

**Name of Company or Plumbing Business**: [Schroering Plumbing Heating]

**Plumbing Contractor License Number**: [09900110]

**Address (Number and Street, City, State, ZIP Code)**: [2145 S St Rd 1602 Jasper In 47546]

**Date Signed**: [4/24/03]

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

---

**Notary Certificate**

<table>
<thead>
<tr>
<th>STATE OF</th>
<th>COUNTY OF</th>
<th>SS:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I, [Phil Schroering], 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 Notary Public**: [Notary]

**Printed or Typed Name of Notary Public**: [Phil Schroering]

**Date Subscribed and sworn to**: [Date]

**County of Residence**: [County]

**Date Commission Expires**: [Date]

---

**Section 3 (To be completed by all applicants)**

<table>
<thead>
<tr>
<th>STATE OF</th>
<th>COUNTY OF</th>
<th>SS:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I, [Adam M Wahl], 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**: [Adam M Wahl]

**Printed or Typed Name of Applicant**: [Adam M Wahl]

**Date Subscribed and sworn to**: [Date]

**County of Residence**: [County]

**Date Commission Expires**: [Date]
EMPLOYER AFFIDAVIT OF EXPERIENCE IN PLUMBING TRADE

I hereby certify that Adam M Wahl has worked in the plumbing trade as defined in commission rule 860 IAC 1-1-9 for the period of 6-7-01 to 1-1-03.

<table>
<thead>
<tr>
<th>Signature of employer or licensed plumbing contractor</th>
<th>Name of company or plumbing business</th>
<th>Plumbing contractor license number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phil Schroering</td>
<td>Schroering Plumbing</td>
<td>88200130</td>
</tr>
</tbody>
</table>

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

2145 S St Rd 162, Jasper, IN 47546

Date signed 4/24/08

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

NOTARY CERTIFICATE

STATE OF Indiana

COUNTY OF Dubois

SS:

I, Phil Schroering, 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
Phil Schroering

Printed or typed name of employer
Phil Schroering

Date subscribed and sworn to Notary Public
04/24/08

SECTION 3 (to be completed by all applicants)

NOTARY CERTIFICATE

STATE OF Indiana

COUNTY OF Dubois

SS:

I, Adam M Wahl, 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
Adam M Wahl

Printed or typed name of applicant
Adam M Wahl

Date subscribed and sworn to Notary Public
04/24/08
# Journeyman Application Checklist

**Applicant Name:** Wahl Adam  
*IC 25-28.5-1-12*

- **$30 Fee**
- **At Least 18 Years of Age**
- **Apprentice License #** N/A  
- **Journeyman License #**

**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 #:
  - Plumbing Contractor License #:
    *PC 887 001 30*
    *Expires: 12-31-09*
  - Section Two and Application Notarized [ ] Yes [ ] No

- **Length of Employment:** 4+  
- **Employer Affidavits:** [ ] Yes [ ] No
- **Application Affidavits:** [ ] Yes [ ] No

- **Has a Conviction Record** [ ] Yes [ ] No

- **Documentation Attached**
- **Documentation Requested**

**Additional Supporting Documentation:**

```
Aware of app renewal copy to.
```

## Commission Action Section

- **Approved**
- **Tabled, pending receipt of the following:**
  *IC 25-28.5-1-12*

- **Denied**
- **Reason for Denial:**
  - **Statute IC:** 25-28.5-1-12
  - **Rule 860 IAC**

**Comments:** Send Contractor letter working without Apprenticeship License. Has not completed 4-Year Apprenticeship Program may apply after completion.

- **Commission Signature:**  
- **Date:** 5-28-08
- **Commission Signature:**
- **Date:**

---

115
March 20, 2008

Indiana Plumbing Commission  
Attn: Kevin Moore, Case Manager

Re: Request to take Plumbing Test

I am contacting you, to request your consideration in allowing Adam Wahl to take the Journeyman Plumber examination.


He then began working for a Licensed Plumber in Indianapolis.
The Plumbing Contractor with which he was working did not compensate for attending Plumbing Apprenticeship schooling, so he was not able to attend.


Adam is a very competent plumber & I am confident that he knows the Plumbing Codes quite well.

Adam has been performing Plumbing work, full time for almost 7 years & I feel very confident he deserves your consideration to take the Journeyman Plumber examination.

Thank you for your time & consideration in this matter.

Should you have any further questions or concerns, please feel free to contact me.

Sincerely,

Phil Schroering
Owner, Schroering Plumbing Indy, LLC
March 20, 2008

Indiana Plumbing Commission
Attn: Kevin Moore, Case Manager

Re: Request to take Plumbing Test

I am contacting you, to request your consideration in allowing Adam Wahl to take the Journeyman Plumber examination.

The Plumbing Contractor with which he was working did not compensate for attending Plumbing Apprenticeship schooling, so he was not able to attend. On Jan. 1, 2007, Adam began working for Schroering Plumbing Indy, LLC & enrolled in the Apprenticeship program with Mechanical Skills, Inc beginning Aug. 21, 2007 & is presently attending classes.
Adam is a very competent plumber & I am confident that he knows the Plumbing Codes quite well.
Adam has been performing Plumbing work, full time for almost 7 years & I feel very confident he deserves your consideration to take the Journeyman Plumber examination.

Thank you for your time & consideration in this matter.

Should you have any further questions or concerns, please feel free to contact me.

Sincerely,

Phil Schroering
Owner, Schroering Plumbing Indy, LLC
**APPLICATION FOR JOURNEYMAN PLUMBER EXAMINATION FOR LICENSING**

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

**FEE: $30.00**

**ALL FEES ARE NON-REFUNDABLE AND NON-TRANSFERABLE.**

<table>
<thead>
<tr>
<th>Social Security number</th>
<th>* 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.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of applicant</td>
<td>Adam M. Wahl</td>
</tr>
<tr>
<td>Date of birth (month, day, year)</td>
<td>2/29/1980</td>
</tr>
<tr>
<td>Address (number, street, city, state, ZIP code)</td>
<td>1631 N 600 W Indianapolis IN 46205</td>
</tr>
<tr>
<td>County</td>
<td>Hancock</td>
</tr>
<tr>
<td>Telephone number</td>
<td>317-061-9606</td>
</tr>
<tr>
<td>Have you ever been convicted of a crime? (if &quot;Yes&quot;, provide a copy of the court order and any pertinent documents)</td>
<td>☑ Yes</td>
</tr>
</tbody>
</table>

**INSTRUCTIONS:**

1. 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).

2. 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**

**APPROVED APPRENTICESHIP PROGRAM SPONSOR CERTIFICATION OF COMPLETION**

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:

<table>
<thead>
<tr>
<th>Name of apprenticeship program sponsor</th>
<th>Telephone number</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Address (number and street, city, state, ZIP code, county)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Date of enrollment (month, year)</th>
<th>Date of completion (month, year)</th>
</tr>
</thead>
</table>

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

<table>
<thead>
<tr>
<th>Date of enrollment</th>
<th>Signature of manager of approved apprenticeship program sponsor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of completion</td>
<td>Date signed</td>
</tr>
</tbody>
</table>

**NOTARY CERTIFICATE**

STATE OF _______________ COUNTYY 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 manager of approved apprenticeship program sponsor

Signature of Notary Public

Printed or typed name of manager of approved apprenticeship program sponsor

Printed or typed name of Notary Public

Date subscribed and sworn to Notary Public

County of residence

Date commission expires

Page 1 of 3
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 d 860 IAC 1-1-10, as verified by employer, attached herewith:

<table>
<thead>
<tr>
<th>No. of employee</th>
<th>Name of employer:</th>
<th>Plumbing contractor license number (if applicable) PC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phil Schopfer</td>
<td>May Plumbing</td>
<td>88701632</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address (number and street, city, state, ZIP code)</th>
<th>Telephone number</th>
</tr>
</thead>
<tbody>
<tr>
<td>2145 S Rd 162 Jasper, IN 47546</td>
<td>812-485-2466</td>
</tr>
<tr>
<td>11630 Oshawa St Indianapolis IN 46236</td>
<td>317-923-6461</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Dates of employment (month, day, year) From</th>
<th>To</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jul 6, 2001</td>
<td>Jan 1, 2003</td>
</tr>
<tr>
<td>Jan 6, 2003</td>
<td>Mar 1, 2004</td>
</tr>
</tbody>
</table>

APPLICANT AFFIDAVIT OF EXPERIENCE IN PLUMBING TRADE

I hereby certify that I, Adam M. Wahl, have worked in the plumbing trade as defined in commission rule 860 IAC 1-1-9, for the period of 1/1/03 - 9/15/06 for May Plumbing. Name of company or plumbing business: May Plumbing, Owner: Sam May. Address (number and street, city, state, ZIP code): 11630 Oshawa St Indianapolis IN 46236.

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): I am no longer employed at May Plumbing, as I left to begin a new job. Therefore, it would be quite difficult to obtain the signature. I have sent copies of this form.

Signature of applicant: Adam M. Wahl

NOTARY CERTIFICATE

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: Adam M. Wahl
Signature of Notary Public: 

Printed or typed name of applicant: Adam M. Wahl
Printed or typed name of Notary Public: 

Date subscribed and sworn to Notary Public: 4/24/08
County of residence: 
Date commission expires: 

Page 2 of 3
**EMPLOYER AFFIDAVIT OF EXPERIENCE IN PLUMBING TRADE**

I, hereby certify that **Adam M Wahl** has worked in the plumbing trade as defined in commission rule 860 IAC 1-1-9 for the period of **6-7-01** to **1-1-03**.

**Signature of employer or licensed plumbing contractor**

**Phil Schroering**

**Name of company or plumbing business**

Schroering Plumbing Service

**Signature of Notary Public**

Linda L Schroering

**Plumbing contractor license number**

899001930

**Address (number and street, city, state, zip code)**

2145 S 6th Rd 162 Jasper IN 47546

**Date signed**

04/24/08

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

---

**NOTARY CERTIFICATE**

STATE OF Indiana  
COUNTY OF Dubois  

I, **Phil Schroering**, 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**

Phil Schroering

**Signature of Notary Public**

Linda L Schroering

**Printed or typed name of employer**

Phil Schroering

**Printed or typed name of Notary Public**

Linda L Schroering

**Date subscribed and sworn to Notary Public**

04/24/08

**County of residence**

Dubois

**Date commission expires**

7/20/08

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**SECTION 3 (to be completed by all applicants)**

**NOTARY CERTIFICATE**

STATE OF Indiana  
COUNTY OF Dubois  

I, **Adam M Wahl**, 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**

Adam M Wahl

**Signature of Notary Public**

Linda L Schroering

**Printed or typed name of applicant**

Adam M Wahl

**Printed or typed name of Notary Public**

Linda L Schroering

**Date subscribed and sworn to Notary Public**

04/24/08

**County of residence**

Dubois

**Date commission expires**

7/20/08

---

**RECEIVED**

**APR 28 2008**

Indiana Professional Licensing Agency

Page 3 of 3
# Application for Journeyman Plumber Examination for Licensing

**State Form 40602 (R10 / 11-02)**

Approved by State Board of Accounts, 2002

---

**ALL FEES ARE NON-REFUNDABLE AND NON-TRANSFERABLE.**

**FEE: $30.00**

---

**Social Security number:** 381-38-4543

---

**Name of applicant:** Adam M. Wall

**Date of birth (month, day, year):** 2/29/80

---

**Address (number and street, city, state, ZIP code):** 66347 W. Longview Dr., McCordsville, IN 46055

---

**County:** Hancock

**Telephone number:** 317-336-6178

---

**Have you ever been convicted of a crime?** (If "Yes", provide a copy of the court order and any pertinent documents)

- [ ] Yes
- [x] No

---

**INSTRUCTIONS:**

1. 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).

2. 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).

---

## Approved Apprenticeship Program Sponsor Certification of Completion

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:**

**Telephone number:**

**Address (number and street, city, state, ZIP code, county):**

**Date of enrollment (month, year):**

**Date of completion (month, year):**

I hereby certify that [Name of apprentice] successfully completed four (4) years of training in an approved apprenticeship program.

**Date of enrollment:**

**Signature of manager of approved apprenticeship program sponsor:**

**Date of completion:**

**Signature of manager of approved apprenticeship program sponsor:**

---

## Notary Certificate

STATE OF Indiana Professional Licensing Agency

COUNTY OF Hancock

I, , having been duly sworn or affirmed, 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:**

**Signature of Notary Public:**

**Printed or typed name of manager of approved apprenticeship program sponsor:**

**Printed or typed name of Notary Public:**

**Date subscribed and sworn to Notary Public:**

**County of residence:**

**Date commission expires:**

---

Page 1 of 3
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: Phil Schroering

Plumbing contractor license number (if applicable): PC 88900130

Address (number and street, city, state, ZIP code):
2480 S Timberlin Dr, Jasper IN 47546

County: Dubois

Telephone number: 812-482-2466

Dates of employment (month, day, year):
From July 6 2001 To Jan. 1 2003

Name of employer: May Plumbing

Plumbing contractor license number (if applicable): PC 88701082

Address (number and street, city, state, ZIP code):
11630 Oshawa St, Indianapolis, IN 46236

County: Marion

Telephone number: 317-823-6461

Dates of employment (month, day, year):
From Jan 6, 2003 To March 1, 2004

From Jan 1, 2005 To Sept 15, 2006

APPLICANT AFFIDAVIT OF EXPERIENCE IN PLUMBING TRADE

I hereby certify that I, Adam M. Uohl, have worked in the plumbing trade as defined in commission rule 860 IAC 1-1-9, for the period of 1/6/03 - 11/15/06, for May Plumbing, as the owner or licensed contractor.

Name of employer or licensed contractor: May Plumbing

Address (number and street, city, state, ZIP code):
11630 Oshawa St, Indianapolis, IN 46236

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):
I am no longer employed at May Plumbing, as I left to begin a new job, therefore it would be quite awkward & difficult to obtain the signature. I have sent copy's of W2 for proof.

Signature of applicant: Adam M. Uohl

Date signed: 4-11-07

NOTARY CERTIFICATE

STATE OF Indiana

COUNTY OF Hancock

I, Christie Wise, 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: Adam M. Uohl

Signature of Notary Public: Christie Wise

Printed or typed name of applicant: Adam M. Uohl

Printed or typed name of Notary Public: Christie Wise

Date subscribed and sworn to Notary Public: 4/11/07

County of residence: Marion

Date commission expires: Feb 5 2012
EMPLOYER AFFIDAVIT OF EXPERIENCE IN PLUMBING TRADE

I hereby certify that  Adam M. Wahl  has worked in the plumbing trade as

defined in commission rule 860 IAC 1-1-9 for the period of  6-7-01  to  1-1-03

Day, month, year  Day, month, year

Signature of employer or licensed plumbing contractor  Phil Schroering  
Name of company or plumbing business  Schroering Plg & Htg  
Plumbing contractor license number  88900130  

Address (number and street, city, state, Zip code)  2145 S ST RD 162 Jasper IN 47546  
Date signed  4/13/07

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

NOTARY CERTIFICATE

STATE OF  Indiana  }  SS:
COUNTY OF  Dubois  

1.  Adam M. Wahl  , having been duly sworn on oath, say that I am the
above-named applicant, 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  Phil Schroering  
Printed or typed name of employer  PHIL SCHROERING  
Date subscribed and sworn to Notary Public  4/13/07  

SECTION 3 (to be completed by all applicants)

NOTARY CERTIFICATE

STATE OF  Indiana  }  SS:
COUNTY OF  Dubois  

1.  Adam M. Wahl  , 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  Adam M. Wahl  
Printed or typed name of applicant  ADAM M. WAHL  
Date subscribed and sworn to Notary Public  4/10/07  

RECEIVED

APR 22 2008
Indiana Professional Licensing Agency

Page 3 of 3
<table>
<thead>
<tr>
<th>Field</th>
<th>Value</th>
</tr>
</thead>
<tbody>
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<td>Control number</td>
<td>001</td>
</tr>
<tr>
<td>OMB No.</td>
<td>1545-0008</td>
</tr>
<tr>
<td>Employer identification number (EIN)</td>
<td>35-1719514</td>
</tr>
</tbody>
</table>
| Employer’s name, address, and ZIP code | MAY PLUMBING  
11630 OSHAWA STREET  
OAKLANDON, IN 46236-2920 |
| Employee’s social security number | |
| Employee’s first name and initial | ADAM M |
| Last name | WAHL |
| State where wages were paid | IN |
| Employer’s state ID number | |
| State wages, tips, etc | 40725.44 |
| State income tax | 1355.85 |
| Local wages, tips, etc | 40725.44 |
| Local income tax | 428.14 |
| Wages, tips, other compensation | 40725.44 |
| Federal income tax withheld | 5628.00 |
| Social security wages | 40725.44 |
| Social security tax withheld | 2524.95 |
| Medicare wages and tips | 40725.44 |
| Medicare tax withheld | 590.51 |
| Social security tips | |
| Allocated tips | |
| Advance EIC payment | |
| Dependent care benefits | |
| Nonqualified plans | |
| Statutory | |
| Retirement | |
| Third-party sick pay | |
| Other | |
| Locality | HANCO |

**Form W-2 Wage and Tax Statement**

**Department of the Treasury—Internal Revenue Service**

**2005**
<table>
<thead>
<tr>
<th>Control number</th>
<th>OMB No. 1545-0008</th>
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<tr>
<td>Employer identification number (EIN)</td>
<td>35-1719514</td>
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<tr>
<td>Employer's name, address, and ZIP code</td>
<td>MAY PLUMBING 11630 OSHAWA STREET INDIANAPOLIS, IN 46236</td>
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<tr>
<td>Employee's social security number</td>
<td>307-86-4543</td>
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<tr>
<td>Employee's first name and initial</td>
<td>Last name</td>
</tr>
<tr>
<td>ADAM M</td>
<td>WAHL</td>
</tr>
<tr>
<td>Employee's address and ZIP code</td>
<td></td>
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<tr>
<td>IN</td>
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<tr>
<td></td>
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<tr>
<td>1 Wages, tips, other compensation</td>
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<tr>
<td>2 Federal income tax withheld</td>
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<td>3 Social security wages</td>
<td>34247.77</td>
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<td>4 Social security tax withheld</td>
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<td>5 Medicare wages and tips</td>
<td>34247.77</td>
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<td>6 Medicare tax withheld</td>
<td>496.59</td>
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<td>7 Social security tips</td>
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<td>8 Allocated tips</td>
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<td>9 Advance EIC payment</td>
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<td>10 Dependent care benefits</td>
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<tr>
<td>11 Nonqualified plans</td>
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<tr>
<td>12a See instructions for box 12b</td>
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<tr>
<td>12b</td>
<td></td>
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<tr>
<td>13 Statutory employee retirement plan</td>
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<tr>
<td>14 Other</td>
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</tr>
<tr>
<td>12c</td>
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<td>12d</td>
<td></td>
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<tr>
<td>15 State</td>
<td>Employer's state ID number</td>
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<tr>
<td>IN</td>
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<td>16</td>
<td>34247.77</td>
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</table>

**W-2 Wage and Tax Statement**

Form C—For EMPLOYEES RECORDS. (See Notice to Employee on back of Copy B.)

Department of the Treasury—Internal Revenue Service
Safe, accurate, FAST! Use [e-file]

**RECEIVED**

APR 24 2008

Indiana Professional Licensing Agency
APPLICATION FOR APPROVAL OF PLUMBING APPRENTICE SCHOOL

State Form 49995 (1-01)

INSTRUCTIONS: 1. Provide the school curriculum, which must include the subjects taught, and the hours spent teaching each subject.
2. No fee.
3. Use a separate sheet of paper for additional subjects and hours.

Check one: ☐ New Application ☒ Annual Update

Name of school
South Central Indiana Ass. of Plumbing, Heating

Bureau of Apprenticeship training number / program number (if applicable)

Name of manager or contact person
Beth Gudorf

Address of school (number and street)
602 E 16th St.

City Jasper State IN ZIP code 47546 County Dubois

SCHOOL SUBJECTS

List each subject below.

See attached lesson plan outlines taken from our apprenticeship standards dated 7/1/88 for third thru fifth years.

See attached lesson plan outlines taken from our apprenticeship standards dated 6/1/05 fro first year and 6/1/06 fro second year.

NOTARY CERTIFICATE

I, the undersigned, submit this application in conformance with 850 IAC 2-1-7. I understand that any violations of the license laws or rules of the Indiana Plumbing Commission may cause loss of approval. I also understand that the Indiana Plumbing Commission shall be notified of any change of name, manager, contact person, or address. I certify that the information given in this application is true and correct to the best of my knowledge.

STATE OF: Indiana COUNTY OF: Dubois } SS

Signature of manager / contact person
Beth A. Gudorf

Printed or typed name of manager / contact person
Beth A. Gudorf

Date subscribed and sworn to Notary Public 1-8-08 County of residence Dubois Date commission expires 8-7-2015

Cynthia Nicholson

Signature of Notary Public

Printed or typed name of Notary Public
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- Lesson 2: Plumbing Laws, Tools, and Safety
- Lesson 3: Hand Tools Used in Plumbing Work
- Lesson 4: Rough-In Tools – Copper, Plastic, and Soil Pipe
- Lesson 5: Rough-In Tools – Steel Pipe
- Lesson 6: Finish and Repair Tools
- Lesson 7: Welding and Power Tools

**Lessons 8-11  Basic Arithmetic Needed for Plumbing Work**

- Lesson 8: Review – Numbers, Fractions, and Decimals
- Lesson 9: Mathematical Operations – Fractions
- Lesson 10: Mathematical Operations – Decimals and Fractions
- Lesson 11: Measuring Tapes, Folding Rules, and Scale Rulers

**Lessons 12-15  Related Science**

- Lesson 12: Goals of Plumbing, Water Sources, Waste Disposal
- Lesson 13: Sewage Disposal
- Lesson 14: Introduction to Gases
- Lesson 15: Mechanical Properties of Materials and Structures

**Lessons 16-20  Installation Practices**

- Lesson 16: Cutting, Drilling, and Nail Protection for Building Structural Elements
- Lesson 17: Piping Materials Used in Plumbing Work – Pressure
- Lesson 18: Piping Materials Used in Plumbing Work – DWV
- Lesson 19: Joining Methods and Materials for DWV Piping
- Lesson 20: Pressure Pipe and Fittings
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Lesson 27: Safety Considerations with Power Tools
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# LESSON PLAN HOUR OUTLINE

## THIRD YEAR

<table>
<thead>
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<th>SUBJECT</th>
<th>SUGGESTED TIME</th>
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<td>36 Hours</td>
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<td>Mathematics</td>
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<td>Gas Code</td>
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<td>Related Science</td>
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<tr>
<td>Blueprint Reading</td>
<td>18 Hours</td>
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<tr>
<td>Field Trips</td>
<td>12 Hours</td>
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Total 156 Hours

Apprentice shall be required to successfully complete one hundred and forty-four (144) hours of related instruction to receive credit for the year.

## TEACHING AIDS:

1. Plumbing Tools
2. Plumbing Fittings
3. Charts
4. Films
5. Manufacturers Specification Sheets
6. Handout Sheets
7. Reference Books
8. Instructors Notes

## STUDENT AIDS:

1. Course Textbook(s)
2. Student Notebook
# Plumbing Apprentice Training Program

## Lesson Plan Hour Outline

### Fourth Year

<table>
<thead>
<tr>
<th>Subject</th>
<th>Suggested Time</th>
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<tbody>
<tr>
<td>Installation Practices</td>
<td>34 Hours</td>
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<tr>
<td>Mathematics</td>
<td>18 Hours</td>
</tr>
<tr>
<td>Related Science</td>
<td>12 Hours</td>
</tr>
<tr>
<td>Blueprint Reading</td>
<td>24 Hours</td>
</tr>
<tr>
<td>Plumbing Code</td>
<td>36 Hours</td>
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<tr>
<td>Plumbing Curriculum</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>156 Hours</strong></td>
</tr>
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Apprentice should successfully complete one hundred and forty-four (144) hours of related instruction to receive credit for the year.

### Teaching Aids:
1. Plumbing Tools
2. Plumbing Fittings
3. Charts
4. Films
5. Manufacturers Specification Sheets
6. Handout Sheets
7. Reference Books
8. Instructors Notes

### Student Aids:
1. Course Textbook(s)
2. Student Notebook
PLUMBING APPRENTICE TRAINING PROGRAM

LESSON PLAN HOUR OUTLINE

FIFTH YEAR

SUBJECT
Installation Practices
Blueprint Reading

SURVEYED TIME
120 Hours
Total
36 Hours
156 Hours

Apprentice shall be required to successfully complete one hundred and forty-four (144) hours of related instruction to receive credit for the year.

TEACHING AIDS:
1. Plumbing Tools
2. Plumbing Fittings
3. Charts
4. Films
5. Manufacturers Specifications Sheets
6. Handout Sheets
7. Reference Books
8. Blueprints
9. Instructors Notes

STUDENT AIDS:
1. Course Textbook(s)
2. Student Notebook
### APPLICATION FOR APPROVAL OF PLUMBING APPRENTICE SCHOOL

**State Form 49995 (1-01)**

**INSTRUCTIONS:**
1. Provide the school curriculum, which must include the subjects taught, and the hours spent teaching each subject.
2. No fee.
3. Use a separate sheet of paper for additional subjects and hours.

---

<table>
<thead>
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<th>Check one:</th>
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<td>☐ New Application  ☒ Annual Update</td>
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**Name of school**
FORT WAYNE AREA PLUMBING HEATING AND COOLING CONTRACTORS

**Bureau of Apprenticeship training number / program number (if applicable)**

**Telephone number**
(260) 410-5163

**School Fax number**
(260) 489-6227

<table>
<thead>
<tr>
<th>Name of manager or contact person</th>
</tr>
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<tbody>
<tr>
<td>SHERRY ELWARD</td>
</tr>
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<table>
<thead>
<tr>
<th>Address of school (number and street)</th>
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<tr>
<td>3420 W COOK RD</td>
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<table>
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<tr>
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<tr>
<td>FORT WAYNE</td>
<td>IN</td>
<td>46818</td>
<td>ALLEN</td>
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### SCHOOL SUBJECTS

<table>
<thead>
<tr>
<th>List each subject below.</th>
<th>Hours</th>
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<tbody>
<tr>
<td>1ST YEAR: INTRO TO THE TRADE, SIMPLE MATH, SCIENCE OF PLUMBING WASTE DISPOSAL, PIPE FITTING</td>
<td>144 HOURS</td>
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<tr>
<td>ANALYSIS, OSHA TRAINING, FIXTURES, FITTINGS, VALVES, BASIC MECHANICAL DRAWING, FIRST AID.</td>
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<tr>
<td>2ND YEAR: WATER DISTRIBUTIN SYSTEM, MATH, OFFSETS, FORMULAS, DRAINS, WASTE, VENT SYSTEMS</td>
<td>144 HOURS</td>
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<tr>
<td>ROUGH IN SHEETS, RELATED SCIENCE, RIGGING, HOISTING.</td>
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<tr>
<td>3RD YEAR: THEORY OF OPERATION &amp; INSTALLATION OF RESIDENTIAL, COMMERCIAL, INDUSTRIAL FIXTURE</td>
<td>144 HOURS</td>
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<tr>
<td>APPLIANCES, GAS PIPE AND APPLIANCE VETING, CORROSION CONTROL, LEVELS, TRANSITS, OFFSET</td>
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<tr>
<td>CALCULATIONS, HEAT TRANSFER, BASIC ELECTRICITY, BLUEPRINT ANALYSIS.</td>
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<tr>
<td>4TH YEAR: REPAIR OF FIXTURES, FITTINGS, PUMPS INDIRECT WASTES, CROSS CONNECTION CONTROL</td>
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<tr>
<td>DEVICES, BASIC HEATING SYSTEMS, MATERIAL TAKE OFF, PLUMBING CODE, FINAL REVIEW, EXAMS.</td>
<td></td>
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</tbody>
</table>

---

**RECEIVED**
JUN 19, 2008

---

**NOTARY CERTIFICATE**

I, the undersigned, submit this application in conformance with 860 IAC 2-1-7. I understand that any violation of the laws or rules of the Indiana Plumbing Commission may cause loss of approval. I also understand that the Indiana Plumbing Commission shall be notified of any change of name, manager, contact person, or address. I certify that the information given in this application is true and correct to the best of my knowledge.

| STATE OF: | INDIANA |
| COUNTY OF: | ALLEN | SS |

Signature of manager / contact person

SHERRY ELWARD

Printed or typed name of manager / contact person

SHERRY ELWARD

Signature of Notary Public

DEBORAH M CHIVINGTON

Printed or typed name of Notary Public

DEBORAH M CHIVINGTON

Date subscribed and sworn to Notary Public

6/16/08

County of residence

ALLEN

Date commission expires

11/13/08
# PLUMBING APPRENTICESHIP PROGRAM - RENEWAL APPLICATION

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Fort Wayne Area Plumbing, Heating and Cooling Contractors, Inc  
919 Charlotte Avenue  
Fort Wayne IN 46805

**INSTRUCTIONS:**  
(a) Make any necessary address change in the appropriate shaded area; and  
(b) Sign and date application in ink.

If your curriculum has changed or been updated since last renewal – please attach a copy of your new curriculum.

I hereby swear or affirm under that the information provided here is true and correct to the best of my knowledge and that we wish to continue as an active program.

<table>
<thead>
<tr>
<th>Signature of Authority</th>
<th>Date Signed</th>
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<tbody>
<tr>
<td>Quincey Edward</td>
<td>06/16/08</td>
</tr>
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</table>

Make Check Payable To  
Indiana Professional Licensing Agency  
402 W. Washington St. Room W072, Indianapolis, IN 46204

Remove at Perforation
Check one:

- [ ] New Application
- [x] Annual Update

Name of school: **ARS of Indiana**

Bureau of Apprenticeship training number / program number (if applicable): **IN 0700 300 18**

Name of manager or contact person: **Jerry Baker**

Address of school (number and street): **25 Woodrow Ave.**

City: **Indianapolis**

State: **Indiana**

ZIP code: **46241**

County: **Marian**

**SCHOOL SUBJECTS**

<table>
<thead>
<tr>
<th>Subject</th>
<th>Hours</th>
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<tr>
<td>Basic Safety</td>
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<tr>
<td>Intro to Construction Math</td>
<td>15</td>
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<tr>
<td>Intro to Hand Tools</td>
<td>10</td>
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<tr>
<td>Intro to Power Tools</td>
<td>5</td>
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<tr>
<td>Intro to Blueprints</td>
<td>2.5</td>
</tr>
<tr>
<td>Basic Communication Skills</td>
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</tr>
<tr>
<td>Basic Employability Skills</td>
<td>15</td>
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</tbody>
</table>

**TOTAL HOURS:** 20.5

**NOTARY CERTIFICATE**

I, the undersigned, submit this application in conformance with 860 IAC 2-1-7. I understand that any violations of the license laws or rules of the Indiana Plumbing Commission may cause loss of approval. I also understand that the Indiana Plumbing Commission shall be notified of any change of name, manager, contact person, or address. I certify that the information given in this application is true and correct to the best of my knowledge.

STATE OF: **Indiana**

COUNTY OF: **Marian**

Signature of manager / contact person: **Jerry Baker**

Signature of Notary Public: **Jenny L. Maxwell**

Printed or typed name of manager / contact person: **Jerry Baker**

Printed or typed name of Notary Public: **Jenny L. Maxwell**

Date subscribed and sworn to Notary Public: **09/12/08**

County of residence: **Hancock County**

Date commission expires: **12/01/14**
INSTRUCTIONS: 1. Provide the school curriculum, which must include the subjects taught, and the hours spent teaching each subject.
2. No fee.
3. Use a separate sheet of paper for additional subjects and hours.

Check one:
- [ ] New Application
- [x] Annual Update

Name of school: ARS of Indiana

Bureau of Apprenticeship training number / program number (if applicable):

IN 0700 0018

Name of manager or contact person: Jerry Rader

Address of school (number and street):

85 Woodrow Ave.

City: Indianapolis

State: Indiana

ZIP code: 46241

County: Marion

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<td>Plumbing Safety</td>
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<td>Plumbing Tools</td>
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<td>Intro to Plumbing Math</td>
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<td>Intro to Plumbing Drawings</td>
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<td>Plastic Pipe &amp; Fittings</td>
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<tr>
<td>Copper Pipe &amp; Fittings</td>
<td>12.5</td>
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<tr>
<td>Cast Iron Pipe &amp; Fittings</td>
<td>10.5</td>
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<tr>
<td>Carbon Steel Pipe &amp; Fittings</td>
<td>10</td>
</tr>
<tr>
<td>Corrugated Stainless Steel Tubing</td>
<td>10</td>
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<tr>
<td>Fixtures &amp; Faucets</td>
<td>10</td>
</tr>
<tr>
<td>Intro to Drain, Waste, and Vent (DWV) Systems</td>
<td>10</td>
</tr>
</tbody>
</table>

Total Hours: 112.50

NOTARY CERTIFICATE

I, the undersigned, submit this application in conformance with 860 IAC 2-1-7. I understand that any violations of the license laws or rules of the Indiana Plumbing Commission may cause loss of approval. I also understand that the Indiana Plumbing Commission shall be notified of any change of name, manager, contact person, or address. I certify that the information given in this application is true and correct to the best of my knowledge.

STATE OF: Indiana
COUNTY OF: Marion

Signature of manager / contact person:

Jerry Rader

Printed or typed name of manager / contact person:

Jerry Rader

Signature of Notary Public:

Jenny R. Maxwell

Printed or typed name of Notary Public:

JENNY R. MAXWELL

NOTARY PUBLIC STATE OF INDIANA
HANCOCK COUNTY

Date subscribed and sworn to:

9/12/18

County of residence:

Date commission expires:

12/08/14

MY COMMISSION EXPIRES 12/08/14
**APPLICATION FOR APPROVAL OF PLUMBING APPRENTICE SCHOOL**

**State Form 49995 (1-01)**

**INSTRUCTIONS:**
1. Provide the school curriculum, which must include the subjects taught, and the hours spent teaching each subject.
2. No fee.
3. Use a separate sheet of paper for additional subjects and hours.

Check one:

- [ ] New Application
- [x] Annual Update

**Name of school:**

ARS of Indiana

**Bureau of Apprenticeship training number / program number (if applicable):**

IN 070030018

**Name of manager or contact person:**

Jerry Rader

**Address of school (number and street):**

25 Woodrow Ave.

**City:**

Indianapolis

**State:**

Indiana

**ZIP code:**

46241

**County:**

Marion

**SCHOOL SUBJECTS**

<table>
<thead>
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<th>Subject</th>
<th>Hours</th>
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<tr>
<td>Plumbing Math II</td>
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<td>Reading Commercial Drawings</td>
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<td>Hangers, Supports, Structural Penetrations, &amp; Fire Stopping</td>
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<td>Installing and Testing DWV Piping</td>
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<td>Installing Roof, Floor, and Area Drains</td>
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<td>Types of Valves</td>
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<td>Installing and Testing Water Supply Piping</td>
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<tr>
<td>Installing Fixtures, Valves, and Faucets</td>
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<tr>
<td>Intro to Electricity</td>
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<td>Installing Water Heaters</td>
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<td>Fuel Gas Systems</td>
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<tr>
<td>Servicing of Fixtures, Valves, and Faucets</td>
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**TOTAL:** 165

**NOTARY CERTIFICATE**

I, the undersigned, submit this application in conformance with 860 IAC 2-1-7. I understand that any violations of the license laws or rules of the Indiana Plumbing Commission may cause loss of approval. I also understand that the Indiana Plumbing Commission shall be notified of any change of name, manager, contact person, or address. I certify that the information given in this application is true and correct to the best of my knowledge.

**STATE OF:** Indiana

**COUNTY OF:** Marion

**Signature of manager / contact person:**

Jerry Rader

**Printed or typed name of manager / contact person:**

Jerry Rader

**Signature of Notary Public:**

Jenny R. Maxwell

**Printed or typed name of Notary Public:**

Jenny R. Maxwell

**Date commission expires:** 12/05/14

**Date subscribed and sworn to Notary Public:** 1/12/08

**County of residence:**
APPLICATION FOR APPROVAL OF PLUMBING APPRENTICE SCHOOL

INSTRUCTIONS: 1. Provide the school curriculum, which must include the subjects taught, and the hours spent teaching each subject.
2. No fee.
3. Use a separate sheet of paper for additional subjects and hours.

Check one:
- □ New Application  ✓ Annual Update

Name of school
ARS of Indiana

Bureau of Apprenticeship training number / program number (if applicable)
IN 070030018

Name of manager or contact person
Jerry Bader

Address of school (number and street)
25 Woodrow Ave.

City Indiana
State Indiana
ZIP code 46241
County Marion

SCHOOL SUBJECTS

<table>
<thead>
<tr>
<th>Subject</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Applied Math</td>
<td>17.5</td>
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<tr>
<td>Sizing Water Supply Piping</td>
<td>17.5</td>
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<td>Potable Water Treatment</td>
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</tr>
<tr>
<td>Backflow Preventers</td>
<td>20</td>
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<td>Type of Venting</td>
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<tr>
<td>Sizing DWV and Steam Systems</td>
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<tr>
<td>Sewage Pumps &amp; Septic Pumps</td>
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<td>Corrosive-Resistant Waste Piping</td>
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<td>Compressed Air</td>
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NOTARY CERTIFICATE

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STATE OF: Indiana
COUNTY OF: Marion  } SS

Signature of manager / contact person

Printed or typed name of manager / contact person

Date subscribed and sworn to Notary Public

09/12/16

County of residence

HANNCOCK COUNTY

Signature of Notary Public

Printed or typed name of Notary Public

MY COMMISSION EXPIRES 12/08/14
**APPLICATION FOR APPROVAL OF PLUMBING APPRENTICE SCHOOL**

State Form 49995 (1-01)

**INSTRUCTIONS:**
1. Provide the school curriculum, which must include the subjects taught, and the hours spent teaching each subject.
2. No fee.
3. Use a separate sheet of paper for additional subjects and hours.

**Check one:**
- [ ] New Application
- [ ] Annual Update

<table>
<thead>
<tr>
<th>Name of school</th>
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<tbody>
<tr>
<td>ARS of Indiana</td>
<td>(317) 390-5555</td>
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<th>Bureau of Apprenticeship training number / program number (if applicable)</th>
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<td>IN-070-300-18</td>
<td>(317) 390-5530</td>
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<tr>
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<tbody>
<tr>
<td>Jerry Rader</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address of school (number and street)</th>
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<tbody>
<tr>
<td>25 Woodrow Ave.</td>
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</tbody>
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<table>
<thead>
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<th>State</th>
<th>ZIP code</th>
<th>County</th>
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</thead>
<tbody>
<tr>
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<td>Indiana</td>
<td>46241</td>
<td>Marion</td>
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**SCHOOL SUBJECTS**

<table>
<thead>
<tr>
<th>Subject</th>
<th>Hours</th>
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<tbody>
<tr>
<td>Business Principles of Plumbers</td>
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<tr>
<td>Intro Skills for the Crew Leader</td>
<td>16</td>
</tr>
<tr>
<td>Water Pressure Booster and Recirculation Systems</td>
<td>12.5</td>
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<tr>
<td>Indirect &amp; Special Waste</td>
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<tr>
<td>Hydraulic and Solar Heating Systems</td>
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<td>Codes</td>
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<td>Servicing Piping Systems, Fixtures &amp; Appliances</td>
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<td>Private Water Supply Well Systems</td>
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<tr>
<td>Private Waste Disposal Systems</td>
<td>10</td>
</tr>
<tr>
<td>Swimming Pools &amp; Hot Tubs</td>
<td>17.5</td>
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<tr>
<td>Plumbing for Mobile Homes and Travel Trailers</td>
<td>10</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>146</strong></td>
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</tbody>
</table>

**NOTARY CERTIFICATE**

I, the undersigned, submit this application in conformance with 860 IAC 2-1-7. I understand that any violations of the license laws or rules of the Indiana Plumbing Commission may cause loss of approval. I also understand that the Indiana Plumbing Commission shall be notified of any change of name, manager, contact person, or address. I certify that the information given in this application is true and correct to the best of my knowledge.

**STATE OF:** Indiana

**COUNTY OF:** Marion

**Signature of manager / contact person:**

<table>
<thead>
<tr>
<th>Signature of manager / contact person</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Jerry Rader</td>
<td>Jerry Rader</td>
</tr>
</tbody>
</table>

**Date subscribed and sworn to Notary Public:** 11/1/08

**County of residence:** Marion

**Expires:** 12/31/08

**Printed or typed name of Notary Public:** Jenny R. Maxwell

**Notary Seal:**}

**IN THE MATTER OF:**}

**APPROVAL OF:**}

**INDIANA PROFESSIONAL LICENSING AGENCY**

302 W. Washington St., Rm. E034
Indiana, Indiana 46204
Telephone: (317) 232-2980
Fax: (317) 232-2312
<table>
<thead>
<tr>
<th>Program Registration Number</th>
<th>Date Due</th>
<th>Renewal Fee</th>
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<tbody>
<tr>
<td>SC50600002</td>
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</table>

INSTRUCTIONS: (a) Make any necessary address change in the appropriate shaded area; and (b) Sign and date application in ink.

If your curriculum has changed or been updated since last renewal - please attach a copy of your new curriculum.

I hereby swear or affirm under that the information provided here is true and correct to the best of my knowledge and that we wish to continue as an active program.

Signature of Authority

Date Signed: 6-16-08

Make Check Payable To

Indiana Professional Licensing Agency 402 W. Washington St. Room W072, Indianapolis, IN 46204

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

May 28, 2008

Monthly Report:

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

Lewis R. Marcotte / Owner

RECEIVED
MAY 28 2008
Indiana Professional Licensing Agency
Indiana Plumbing Commission  
Attn. Angela Smith Jones  
402 West Washington Street, Rm W072  
Indianapolis, In 46204

Monthly Report:

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

Lewis R. Marcotte / Owner

RECEIVED

JUN 27 2008

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

July 28, 2008

Monthly Report:

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

Lewis R. Marcotte / Owner

RECEIVED
JUN 27 2008
Indiana Professional Licensing Agency

144
## Expired Plumber Contractor

<table>
<thead>
<tr>
<th>DATE EXPIRED</th>
<th>RENEWAL FEE</th>
<th>LICENSE NUMBER</th>
<th>CURRENT STATUS</th>
<th>EXPENSE NUMBER</th>
<th>CORRECTIONS BELOW</th>
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<tbody>
<tr>
<td>12/31/2001</td>
<td><strong>See Below</strong></td>
<td>PC81052406</td>
<td>Expired</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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)

1. Has any professional license, certificate, registration, or permit you hold or have held been disciplined or are formal charges pending? **YES**

2. Have you been denied a license, certificate, registration, or permit in any state? **YES**

3. Have you been convicted of or pled guilty to a violation of a federal or state law or are criminal charges pending? **YES**

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:** Dale L. Funk  
**Date:** 3/13/08
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

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
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 inquiries 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,

[Signature]
Rebecca Tinsley
Case Manager
Indiana Plumbing Commission
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,

[Signature]

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

[Stamp] RECOIVED
FEB 20 2008
Indiana Professional Licensing Agency
APPLICATION FOR TEMPORARY PLUMBING CONTRACTOR'S LICENSE

INSTRUCTIONS:
1. Please type or print.
2. $25.00 license fee + $75.00 recovery fund surcharge = $100.00 Permit Fee.
3. Make check or money order payable to INDIANA PLUMBING COMMISSION.

NOTE
* Your Social Security number is requested by this agency in accordance with IC 4-1-3-1. It is mandatory that you provide your Social Security number as required by Indiana State Law. The Indiana Department of Revenue is responsible for the confidentiality of your Social Security number.

1. Application will be returned if incomplete.
2. Channal plumbing contractor's license is issued to a person who is the owner or employee of a plumbing business, whether or not they have a plumbing contractor's license.
3. Temporary plumbing contractor's license may be issued to an applicant who has an ownership interest in or is an officer of a plumbing business if the plumbing contractor's license operating the business has been issued or is physically or mentally unable to operate the business.
4. Temporary plumbing contractor's license does not allow the holder to perform actual plumbing services unless holder is a currently licensed plumbing contractor.
5. License holder may employ a journeyman. If a temporary licensing period expires, the holder may perform plumbing contracting under the temporary license. If the holder is a licensed journeyman, the holder may perform plumbing contracting under the temporary license.
6. A temporary license will be issued in six (6) month increments, not to exceed two (2) years.

LICENSEE

Name of plumbing contractor's company or corporation: TWO GUYS PLUMBING

Address (number and street, city, state and zip code):

1839 PRAIRIE AVENUE SOUTH BEND IN 46613

Telephone number: (574) 232-9060

I, the owner or employee of the business, hereby declare that the following is true:

3. Name of deceased or physically or mentally incapacitated plumbing contractor, operating the business

JOSEPH MIESZKO

Date of death or physical or mental incapacity: 08/18/2006

APPLICANT

Full name of applicant for temporary plumbing contractor's license (first, middle, last):

BRENT F. SMITH

Residence address (number and street, city, state, zip code):

26433 HUMMINGBIRD DRIVE SOUTH BEND IN 46619

Residence telephone number: (574) 251-1931

Social Security number: 300-02-6906

License number of journeyman plumber or plumbing contractor:

License number of journeyman plumber or plumbing contractor:

License number of journeyman plumber or plumbing contractor: JPI 20100745

Date of birth (month, day, year): 06/10/1961

5. Does applicant have an ownership interest in the above named company or corporation:

Yes [ ] No [x]

If the answer to Question 6 is in the affirmative, indicate applicant's title

NOTARY

STATE OF: INDIANA

COUNTY OF: ST. JOSEPH

MARK T. GOLABEK, NOTARY PUBLIC

 having been duly sworn; on oath; 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:

Signature of notary public:

Printed or typed name of notary public:

MARK T. GOLABEK

County of residence:

ELKHART

Date of commission expires: 10/1/2013

Original issued: 10/31/06

Date executed: 06/20/2008

Not Valid before July 30, 2008

149
19 May 2008

Brent F. Smith
26453 Hummingbird Drive
South Bend, IN 46619

State of Indiana
Indiana Professional Licensing Agency
302 W. Washington Street, Room E034
Indianapolis, IN 46204-2700

Dear Plumbing Commission Board:

With total commitment of going down to test, I have two more times with out the
drawing part. I am asking for the last six month renewal of my temporary contractor
license.

I have just found out that my UPC Code Book is from 1996. I immediately ordered a new 1999 edition. I realize I need this license for my growing business. This contractor
license is something I want and need.

Sincerely,

Brent Smith
BFS Plumbing
Amends 860 IAC 1-1-2.1 to revise the fee schedule for examination or reexamination to facilitate the outsourcing of the administration of examinations for journeyman plumbers and plumbing contractors to establish that the fees for administration and scoring of the examinations be paid directly to the examination services and to establish the requirements for reinstatement of a delinquent or lapsed license. Amends 860 IAC 1-1-9 to revise the requirements for admission to the journeyman plumber and plumbing contractor examination. Amends 860 IAC 1-3 and 860 IAC 2-1 to facilitate the outsourcing of the administration of the examinations for journeyman plumbers and plumbing contractors. Effective January 1, 2009.

860 IAC 1-1-2.1; 860 IAC 1-1-9; 860 IAC 1-3-1; 860 IAC 1-3-1.1; 860 IAC 1-3-2; 860 IAC 1-3-3; 860 IAC 2-1-1; 860 IAC 2-1-7; 860 IAC 2-1-7.1

SECTION 1. 860 IAC 1-1-2.1 IS AMENDED TO READ AS FOLLOWS:

860 IAC 1-1-2.1 Fee schedule
Authority: IC 25-28.5-1-8
Affected: IC 25-28.5-1-22

Sec. 2.1. The Indiana plumbing commission shall charge and collect the following fees:

(1) For an application for examination as an If the commission administers the individual plumbing contractor examination, the examination or repeat examination a nonrefundable fee of is fifty dollars ($50) and a fee of fifty dollars ($50) for each reexamination one (1) of the two (2) exam parts not previously passed upon notice by the commission.

(2) For the issuance of the initial plumbing contractor license, the following:

(A) When the license is issued in an odd-numbered year, fifty dollars ($50).

(B) When the license is issued in an even-numbered year, one hundred dollars ($100).

(3) For the issuance of an initial license for a corporation, the following:

(A) When the license is issued in an odd-numbered year, fifty dollars ($50).
(B) When the license is issued in an even-numbered year, one hundred dollars ($100).

(4) For an application for examination as an If the commission administers the individual journeyman plumber examination, the examination or repeat examination a nonrefundable fee of is thirty dollars ($30). and a fee of thirty dollars ($30) for each reexamination on one (1) of the two (2) exam parts not previously passed upon notice by the commission.

(5) For issuance of the initial license for a journeyman plumber, the following:

   (A) When the license is issued in an odd-numbered year, fifteen dollars ($15).
   (B) When the license is issued in an even-numbered year, thirty dollars ($30).

(6) If the commission elects to use a professional examination service under IC 25-1-8-5, an applicant for licensure by examination as either an individual plumbing contractor or journeyman plumber shall pay the examination or repeat examination fee assessed by the professional examination service that administers the examination directly to the professional examination service.

(6) (7) For biennial renewal of a plumbing contractor's license, one hundred dollars ($100) payable prior to December 1 of each odd-numbered year.

(7) (8) For biennial renewal of a license for a corporation, one hundred dollars ($100) payable prior to December 1 of each odd-numbered year.

(8) (9) For biennial renewal of a journeyman plumber's license, thirty dollars ($30) payable prior to December 1 of each odd-numbered year.

(9) (10) Application for a renewal received after the expiration date of December 31 of each odd-numbered year and prior to March 1 of the next even-numbered year shall be charged a reinstatement fee of fifteen dollars ($15) in addition to the license renewal fee.

(10) (11) Applications for renewal received after March 1 of the next even-numbered year following expiration and no later than December 31 of the next odd-numbered year following expiration shall be charged the following reinstatement fees in addition to the applicable license renewal fees:

   (A) Journeyman plumber, one hundred dollars ($100).
   (B) Plumbing contractor, two hundred dollars ($200).
   (C) Corporate plumbing contractor, two hundred dollars ($200).

(11) (12) Applications for renewal received after December 31 of the next odd-numbered year following expiration shall be deemed invalid for renewal: comply with the requirements of IC 25-1-8-6.

(Indiana Plumbing Commission; 860 IAC 1-1-2.1; filed Oct 31, 1983, 1:21 p.m.: 7 IR 69; errata, 7 IR 71; filed Oct 29, 1984, 3:07 p.m.: 8 IR 214; filed Jul 30, 1985, 3:13 p.m.: 8 IR 2038; filed Feb 19, 1987, 8:30 a.m.: 10 IR 1390; filed Feb 19, 1990, 11:06 a.m.: 13 IR 1181; filed Jun 14, 1996, 3:00 p.m.: 19 IR 3108; readopted filed May 29, 2001, 10:00
SECTION 2. 860 IAC 1-1-9 IS AMENDED TO READ AS FOLLOWS:

860 IAC 1-1-9 Admission to examination
Authority:  IC 25-28.5-1-8; IC 25-28.5-1-38
Affected:  IC 25-28.5-1

Sec. 9. (a) This section and section 10 of this rule implement the requirements for admission to the journeyman plumber and plumbing contractor examination found in IC 25-28.5-1-12(c).

(b) “Plumbing trade” means being engaged in the work of plumbing (as that term is defined in IC 25-28.5-1-2(1)). The term includes doing plumbing work under the circumstances described in IC 25-28.5-1-32(2), IC 25-28.5-1-32(4), IC 25-28.5-1-32(6), or IC 25-28.5-1-32(7), and IC 25-8.1-32(8).

(c) “Apprenticeship program approved by the commission” means a program that meets the requirements of 860 IAC 2-1-1.

(d) “Four (4) year apprenticeship program” means satisfactory completion of a minimum of five hundred seventy-six (576) hours of classroom instruction and satisfactory completion of six thousand four hundred (6,400) hours of related on-job-training, over at least four (4) years. Credit for previous education, training or experience must be counted toward the total required hours for the apprenticeship program if granted by the Bureau of Apprenticeship and Training, a division of the United States Department of Labor, and approved by the commission. Credit must not exceed seventy-five percent (75%) of the total hours of the apprenticeship program requirement. Approved credit must be documented and presented with the original apprenticeship registration application.

(e) “Four (4) years of experience” means a minimum of six thousand four hundred (6,400) hours in the plumbing trade over at least four (4) years.

(f) No more than forty (40) hours shall be counted in any given calendar week toward meeting the requirements of either subsection (d) or (e). (Indiana Plumbing Commission: 860 IAC 1-1-9; filed Jan 16, 1992, 5:00 p.m.: 15 IR 1022; readopted filed May 29, 2001, 10:00 a.m.: 24 IR 3237)

SECTION 3. 860 IAC 1-3-1 IS AMENDED TO READ AS FOLLOWS:

860 IAC 1-3-1 Examination; journeyman plumber
Authority:  IC 25-28.5-1-8; IC 25-28.5-1-38
Affected:  IC 25-28.5-1

Sec. 1. (a) An applicant for the journeyman plumber license must pass the examination required under this section.

(a) (b) The journeyman plumber examination shall consist of a practical section and a written section. be multiple choice.
(b) The practical section of the examination shall include two (2) parts known as the following:

(1) The copper pipe project.
(2) The soil pipe project.

(e) The written section of the examination shall be a multiple-choice test.

(d) In order to pass the practical section of the examination, an individual must obtain scores of at least seventy percent (70%) on both of the following:

(1) The copper pipe project.
(2) The soil pipe project.

(e) An individual must obtain a passing score of at least seventy percent (70%) on the multiple-choice test in order to pass the written section of the examination. (Indiana Plumbing Commission; 860 IAC 1-3-1; filed Oct 29, 1984, 3:11 p.m.: 8 IR 213; filed Feb 15, 1989, 2:36 p.m.: 12 IR 1556; filed Feb 19, 1990, 11:06 a.m.: 13 IR 1182; filed Sep 8, 1992, 5:00 p.m.: 16 IR 62, eff Oct 1, 1992 [IC 4-22-2-36 suspends the effectiveness of a rule document for thirty (30) days after filing with the secretary of state. LSA Document #92-91 was filed Sep 8, 1992.]; readopted filed May 29, 2001, 10:00 a.m.: 24 IR 3237)

SECTION 4. 860 IAC 1-3-1.1 IS AMENDED TO READ AS FOLLOWS:

860 IAC 1-3-1.1 Examination; plumbing contractor
Authority: IC 25-28.5-1-8; IC 25-28.5-1-38
Affected: IC 25-28.5-1

Sec. 1.1. (a) An applicant for the plumbing contractor license must pass the examination required under this section.

(a) The plumbing contractor examination shall consist of a practical section, a written section, and a drawing section. be multiple choice.

(b) The practical section of the examination shall include two (2) parts known as the following:

(1) The copper pipe project.
(2) The soil pipe project.

(e) The written section of the examination shall be a multiple-choice test.

(d) The drawing section of the examination shall test the applicant's ability and knowledge concerning sanitary drainage systems and water distribution systems.

(e) In order to pass the practical section of the examination, an individual must obtain scores of at least seventy percent (70%) on both of the following:

(1) The copper pipe project.
(2) The soil pipe project.

(f) An individual must obtain a passing score of at least seventy percent (70%) on the multiple-choice written section in order to pass the written section of the examination.

(g) An individual must obtain a score of at least seventy percent (70%) on the drawing section in order to pass the drawing section of the examination. (Indiana Plumbing Commission; 860 IAC 1-3-1.1; filed Sep 8, 1992, 5:00 p.m.: 16 IR 62, eff Oct 1, 1992 [IC 4-22-2-36 suspends the effectiveness of a rule document for thirty (30) days...
SECTION 5. 860 IAC 1-3-2 IS AMENDED TO READ AS FOLLOWS:

860 IAC 1-3-2 Retaking of journeyman plumber and plumbing contractor examination upon failure  
Authority: IC 25-28.5-1-8; IC 25-28.5-1-38  
Affected: IC 25-28.5-1

Sec. 2. (a) References in this section to the examination apply to both the journeyman plumber examination and the contractor examination unless a particular examination is specifically specified.  
(b) (a) An individual who does not pass the entire examination in the first attempt shall be entitled to take it as many as six (6) additional times, under the exemptions from portions of the examination allowed in subsection (e). However, the last examination attempt may be no later than two (2) years after the date the individual was first scheduled to take the examination.  
(e) An individual who passes:  
(1) the practical section;  
(2) the written section;  
(3) one (1) part of the practical section; or  
(4) for the plumbing contractor examination, the drawing section; in any prior taking of the examination allowed under subsection (b), shall not be required to retake that portion in the remaining examination attempts allowed by subsection (b).  
(d) An individual who does not qualify for any of the exemptions provided for in subsection (e) must retake the entire examination.  
(e) (b) Upon the exhaustion of all of the examination attempts allowed by subsection (b), an individual must file a new application and retake the entire examination.  
(f) None of the exemptions contained in this section from retaking a section or part of a section of the journeyman plumber examination or the plumbing contractor examination shall apply to an individual taking the other examination. For example, an applicant for a journeyman plumber license who passes the practical section of the journeyman plumber examination who subsequently applies for a plumbing contractor license shall be required to pass the practical section of the plumbing contractor examination.  
(g) Notwithstanding subsection (b), any individual who took the examination one (1) or more times prior to October 1, 1992, and did not pass it in its entirety:  
(1) shall be entitled to six (6) additional examination attempts with the last being no later than September 30, 1994;  
(2) for the first examination attempt after September 30, 1992, shall be entitled to the examination exemptions the individual would have had under this section as it read on September 30, 1992; and  
(3) for the second and subsequent examination attempts after September 30, 1992, shall be entitled to the examination exemptions allowed by
subdivision (2)—plus those obtained after September 30, 1992, under subsection (e).

(c) An applicant who has not passed the written section or drawing section of the journey plumber or plumbing contractor examination before January 1, 2009, shall lose credit for the section passed and be required to retake the multiple choice examination.

(d) An applicant that has passed the written section and drawing section of the journey plumber or plumbing contractor examination but has failed to pass the practical examination before January 1, 2009, shall qualify for licensure without having to pass the practical examination. (Indiana Plumbing Commission; 860 IAC 1-3-2; filed Feb 15, 1989, 2:36 p.m.: 12 IR 1556; filed Feb 19, 1990, 11:06 a.m.: 13 IR 1182; filed Sep 8, 1992, 5:00 p.m.: 16 IR 63, eff Oct 1, 1992 [IC 4-22-2-36 suspends the effectiveness of a rule document for thirty (30) days after filing with the secretary of state. LSA Document #92-91 was filed Sep 8, 1992.]; readopted filed May 29, 2001, 10:00 a.m.: 24 IR 3237)

SECTION 6. 860 IAC 2-1-7 IS AMENDED TO READ AS FOLLOWS:

860 IAC 2-1-7 Apprenticeship program; approval
Authority: IC 25-28.5-1-8; IC 25-28.5-1-38
Affected: IC 25-28.5-1-18.1

Sec. 7. (a) To be approved, an apprenticeship program must do the following:
(1) Submit a written request for approval to the commission.
(2) Submit in writing the apprenticeship program’s curriculum, which must include the subjects taught and the hours spent teaching each subject.
(3) Provide the address of the apprenticeship program facility, its phone number, and the name of a contact person.
(4) Submit proof of the accreditation required by section 1(2) of this rule.
(5) Require the taking and passing a practical examination as required by section 7.1 of this rule.

(b) Approved apprenticeship programs must notify the commission of any change in the items listed in subsection (a)(2) through (a)(4) within thirty (30) days. (Indiana Plumbing Commission; 860 IAC 2-1-7; filed Dec 18, 2000, 9:31 a.m.: 24 IR 1352; readopted filed May 29, 2001, 10:00 a.m.: 24 IR 3237)

SECTION 7. 860 IAC 2-1-7.1 IS ADDED TO READ AS FOLLOWS:

860 IAC 2-1-7.1 Apprenticeship school examination
Authority: IC 25-28.5-1-8; IC 25-28.5-1-38
Affected: IC 25-28.5-1

Sec. 7.1. (a) Apprenticeship schools shall give each student within the first four (4) years of apprenticeship program an examination that shall test the student’s practical knowledge of the curriculum studied. A student shall not be considered to
have completed a four (4) year apprenticeship program without having passed this examination.

(b) The practical section of the examination shall include three (3) parts known as the following:

(1) The copper pipe assembly project.
(2) The cast iron assembly project.
(3) The plastic pipe assembly project.

(c) In order to pass the practical section of the examination, an individual must obtain scores of at least seventy percent (70%) on all of the following:

(1) The copper pipe assembly project.
(2) The cast iron assembly project.
(3) The plastic pipe assembly project.

(d) The apprenticeship school shall allow each student at least seven (7) attempts to pass the practical examination.

(e) The commission may monitor the administration of the final practical examination:

(1) as a result of a complaint received;
(2) for random sampling; or
(3) to collect data.

(Indiana Plumbing Commission; 860 IAC 1-2-7.1)

SECTION 8. THE FOLLOWING ARE REPEALED: 860 IAC 1-3-3.

SECTION 9. This document takes effect MONTH DAY, YEAR.
Expired license review and renewal process

Questions:
1) Have the license been expired for more than 4 years?
2) Have the license been expired for more than 6 years?
3) Has the license holder continued to practice with an expired license?
4) Is the license holder correcting his own mistake or was the expired license discovered by and inspection officer or other licensing control agency?
5) Have there been any complaints on the license?
6) Has the license holder demonstrated effort in keeping abreast with code and related technology changes?
7) Does the commission feel there are any competency issues that would cause concerns for the health and safety of the public?
8) Does the commission feel there is any other aggravating or mitigating evidence?

License renewal options:
1) License renewal without condition and penalty
2) Probation renewal for one year with condition of 4 hours of approved continuing education or passing the current journeyman or contractor exam.
3) Probation renewal for one year with condition of 8 hours of approved continuing education or passing the current journeyman or contractor exam.
4) Probation renewal for one year with condition of 20 hours of approved continuing education or passing the current journeyman or contractor exam.
5) Probation renewal for one year with condition of passing the current journeyman or contractor exam.
6) No renewal until completion of 20 hours of approved continuing education or passing the current journeyman or contractor exam.
7) No renewal until passing the current journeyman or contractor exam.
8) No renewal
From: MattB172@aol.com  
Sent: Tuesday, July 15, 2008 4:15 PM  
To: WJCPLMBG@aol.com  
Cc: Synko, Robert; ulu210bm@airbaud.net; eott@dillingmechanicl.com; jvanclev@hubbell-premise.com; Jones, Angela  
Subject: Re: plumbing commission

Bill
Issues that I have would be passing the current test if they have been out for a few years and first took their test 10/12/15 years ago. If they continued to practice after letting their license lapse that is a violation of the law. Several of the questions raise issues of improvements or changes in the code that the lapsed licensee will not be aware have transpired. I firmly believe that all lapsed licensee should retest We are in the business of protecting the health of the public and it is are responsibility to protect people of the state of Indiana no matter what excuse these plumbers have.
Matt

In a message dated 7/14/2008 2:39:37 P.M. Eastern Daylight Time, WJCPLMBG writes:

Attached are my thoughts on the possible questions and options for reinstatement of expired licenses. Please look them over and give me your ideas.

Bill Ciriello

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7/18/2008