

BY: A. McDaniel

DATE: 3-13-08



**JAN 14 2008 am**  
**Citation for License or Registration Violation**

Notice of Civil Penalty 2008-0017

Citation no.: 02626

Department of Consumer & Business Services  
Building Codes Division • Enforcement and Licensing  
Mailing address P.O. Box 14470, Salem, OR 97309-0404  
Phone: (503) 378-4133, Fax: (503) 378-3322, TTY: (503) 378-3322  
www.oregonbcd.org

Mail form with payment to:  
DCBS - Fiscal Services  
P.O. Box 14610  
Salem, OR 97309-0445

**FINAL ORDER**

<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Business	DL#: <u>NORTON</u>	AS OF: <u>1/29/08</u>	CCB#:
Last name: <u>NORTON</u>	First name: <u>BERNARD</u>	MI: <u>C</u>	
Business name: <u>T&amp;L COMMUNICATIONS</u>			
Address: <u>2800 NE 65th AV</u>		Phone:	
City: <u>VANCOUVER</u>	State: <u>WA</u>	ZIP: <u>98661</u>	
At the following time and place:			
Date: <u>JANUARY 8, 2008</u>	Time: <u>1246</u>	<input type="checkbox"/> a.m. <input checked="" type="checkbox"/> p.m.	
Address: <u>1902 W BURNSIDE</u>			
City: <u>PORTLAND</u>	State: <u>OR</u>	ZIP: <u>97201</u>	
Violation and actual location of observation:			
Check box(es) that apply and see back of form for violation description: 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input checked="" type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/>			
Actions observed: <u>AGREE + EUGENE NORTON # 89300A</u> <u>1st YEAR APPRENTICE HELPING ANOTHER</u> <u>APPRENTICE INSTALL SECURITY CAMERAS -</u> <u>(OTHER APPRENTICE IS EUGENE HAIR) - ACTIONS</u> <u>WERE MOUNTING BRACKET &amp; MAKING UP BLUE</u> <u>CONNECTORS</u>			
			Civil penalty \$1,000 per violation
Issuing official:			
PRINT name: <u>DAVID M. HILL</u>	Address: <u>1900 SW 4th AV SE 5000</u>		
Title/jurisdiction: <u>CITY OF PORTLAND</u>	City, State, ZIP: <u>PORTLAND OR 97201</u>		
Signature: <u>[Signature]</u>	Phone: <u>503-923-7835</u>		

A copy of this notice was served personally on the alleged violator on: 01/08/08  
 A copy of this notice was served by certified and regular mail on: 01/11/08  
Certified mail receipt no.: 700608100000 - Mailed by: Ann Norbury

<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<u>83369607</u>
Credit card number		Expiration date
Name of cardholder as shown on credit card		
Cardholder signature		\$ Amount

Make check or money order payable to Building Codes Division. If paying by credit card, cardholder must sign credit-card information box. Do not send cash.

FISCAL USE ONLY: Violations: 1-3, 70611/0500; 4-8, 70111/0500; 9-10, 70211/0500; 11-12, 70312/0500



White - BCD  
Pink - Issuer  
Yellow - Respondent

The alleged violation(s) checked on the face of the citation:			
1	No plumbing business registration ORS 447.040	7	Supervising electrician failed to ensure permit obtained OAR 918-282-0140(2)(e)
2	No journeyman plumber certificate of comp. ORS 693.030(1)	8	Supervising electrician failed to ensure individ- ual properly licensed OAR 918-282-0140(2)(f)
3	Permit or suffer an unlicensed person to do plumbing work ORS 693.030(2)(a)	9	No elevator contractor license ORS 460.045(1)
4	No electrical contractor license ORS 479.620(1)	10	No elevator mechanic license ORS 460.057
5	No supervising or journeyman electrical license ORS 479.620(3)	11	No boiler/pressure vessel license contractor/ business ORS 480.630(1)
6	Allowed an unlicensed person to do elec- trical work OAR 918-282-0120(1)	12	No boiler/pressure vessel personal certification ORS 480.630(2)
<b>Civil penalty authority</b>			
Violation 1-3	ORS 455.895(1)(a)	OAR 918-001-0036	
Violation 4-10	ORS 455.895(1)(b)	OAR 918-001-0036	
Violation 11-12	ORS 455.895(1)(c)	OAR 918-001-0036	

### Read carefully

You must do **ONE** of the options listed below:

**Option 1: Agree not to contest the citation and civil penalty**

Follow steps 1-3:

1. Sign and date here:

Signature: \_\_\_\_\_

Date: 1/8/08

2. Mail this citation **and** a check or money order payable to "Building Codes Division" or fill out the credit card information on the face of this citation and send it to:

DCBS Fiscal Services • PO Box 14610 • Salem, OR 97309-0445

3. You must mail this citation and payment, **within 20 days** from the date it was served. (See face of citation for date of service).

**Important:** Choosing this option waives your right to a hearing and you consent to the civil penalty imposed.

**Option 2: Contest the citation and request a hearing**

Hearings are conducted under ORS Chapter 183

Follow steps 1-2:

1. Check the box at right, and sign and date here:  **request a hearing**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

2. Return this citation to Building Codes Division **within 20 days** from the date it was served. (See face of citation for date of service).

**Notice:** If you do not request a hearing within 20 days, this citation will become a final order, effective 22 days after it was served. If you do not request a hearing or if you fail to appear at a scheduled hearing, the division's file on the matter becomes the record. You are entitled to judicial review of this order. Judicial review may be obtained by filing for review within 82 days from the date this order was served. Judicial review is pursuant to the provisions of ORS 183.482 to the Court of Appeals.