

BEFORE THE INSURANCE COMMISSIONER OF THE
STATE OF OKLAHOMA

FILED
MAR 06 2013
INSURANCE COMMISSIONER
OKLAHOMA

STATE OF OKLAHOMA, ex rel. JOHN)
D. DOAK, Insurance Commissioner,)
)
Petitioner,)
)
v.)
)
CHARLES J. MORGAN,)
an unlicensed adjuster,)
)
Respondent.)

Case No. 13-0155-DIS

**CONDITIONAL ADMINISTRATIVE ORDER
AND NOTICE OF RIGHT TO BE HEARD**

COMES NOW the State of Oklahoma, ex rel. John D. Doak, Insurance Commissioner,
by and through his attorney, Julie Meaders, and alleges and states as follows:

JURISDICTION

1. John D. Doak is the Insurance Commissioner of the State of Oklahoma and is charged with the duty of administering and enforcing all provisions of the Oklahoma Insurance Code, 36 O.S. §§ 101 et seq.

2. Charles J. Morgan is an Oklahoma adjuster employed at American Farmers & Ranchers, 800 N. Harvey, Oklahoma City 73124. His adjuster license 92857 lapsed on April 30, 2012 for failing to renew. His address of record is 700 Pepperdine Avenue, Edmond, Oklahoma 73013.

3. The Insurance Commissioner may censure, suspend, revoke or refuse to issue or renew an adjuster's license and or may levy a fine up to \$1,000.00 for each violation of the Oklahoma Insurance Code. 36 O. S. § 6219 and § 6220(A) and (B).

ALLEGATIONS OF FACT

1. Respondent Charles Morgan submitted an application to reinstate his adjuster license on February 20, 2013. The application stated under Respondent's employment history that he has been an adjuster at American Farmers & Ranchers from February 2008 – February 2013.

2. Respondent declared under penalty of perjury that the statements made in the application were true and complete.

3. Oklahoma Insurance Department records reveal that Respondent was issued adjuster license 92857 on April 19, 2006. The license became inactive on April 30, 2012 for failing to renew. Respondent requested reinstatement of his license on February 20, 2013.

4. Respondent was required to maintain an active license while employed as an adjuster with American Farmers & Ranchers between May 1, 2012 – February 2013.

CONCLUSIONS OF LAW

1. Respondent violated 36 O.S. § 6220 (A) (9) and 36 O.S. § 6204 by acting or holding himself out as an adjuster in this state while unlicensed.

ORDER

IT IS THEREFORE ORDERED, ADJUDGED AND DECREED by the Insurance Commissioner, subject to the following paragraph, that the Respondent violated 36 O.S. §§ 6220(A)(9) and 36 O.S. 6204 and as a result **Respondent is FINED** in the amount of **TWO HUNDRED AND FIFTY DOLLARS (\$250.00)**. **Fine to be paid within thirty (30) days of receipt of this Order.**

IT IS FURTHER ORDERED, ADJUDGED AND DECREED by the Insurance Commissioner that this Order is a Conditional Order. Unless the Respondent requests a hearing

with respect to the Allegations of Fact set forth above within thirty (30) days of the date of mailing of this Order, this Order and the penalties set forth above shall become a Final Order on the thirty-first day following the date of mailing of this Order. Such request for hearing, if desired, shall be made in writing, addressed to Julie Meaders, Oklahoma Insurance Department, Legal Division, 3625 NW 56th Street, Suite 100, Oklahoma City, Oklahoma 73112 and must be served on the Oklahoma Insurance Department within the thirty (30) days allotted. The proceedings on any such requested hearing will be conducted in accordance with the Oklahoma Insurance Code, 36 O.S. §§ 101 et. seq. and the Oklahoma Administrative Procedures Act, 75 O.S. §§ 250 through et.seq.

WITNESS My Hand and Official Seal this 6th day of March 2013.



JOHN DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA



Julie Meaders
Assistant General Counsel

CERTIFICATE OF MAILING

I, Julie Meaders, hereby certify that a true and correct copy of the above and foregoing Conditional Administrative Order and Notice of Right to be Heard was mailed by certified mail with postage prepaid and return receipt requested on this 6th day of March, 2013 to:

Charles Morgan
700 Pepperdine Avenue
Edmond, OK 73013

CERTIFIED MAIL NO: 7001 0320 0003 9966 9481

and that notification was sent to:

NAIC/RIRS

and that a copy was delivered to:

Courtney Phipps
Licensing Division



Julie Meaders

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

7001 0320 0003 9966 9481


OFFICIAL USE

Postage	\$	
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage &		

Sent To
Charles Morgan
700 Pepperdine Avenue
Edmond, OK 7313

Street, Apt. No.;
or PO Box No.
City, State, ZIP+4
13-0155-DIS/JAM(mt)Con.Ad.Ord.

PS Form 3800, January 2001 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> 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. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p><i>X</i> </p> <p>B. Received by (Printed Name) <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p><i>Chuck Morgan</i></p> <p>C. Date of Delivery</p> <p><i>3/16/13</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>RECEIVED YES, enter delivery address below: <input type="checkbox"/> No</p> <p>OKLAHOMA INSURANCE DEPARTMENT</p> <p>MAR 19 2013</p> <p>Legal Service Type</p> <p><input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>1. Article Addressed to:</p> <p>Charles Morgan 700 Pepperdine Avenue Edmond, OK 7313</p> <p>13-0155-DIS/JAM(mt)Con.Ad.Ord.</p>	
<p>2. Article Number (Transfer from service label)</p> <p>7001 0320 0003 9966 9481</p>	
PS Form 3811, February 2004	Domestic Return Receipt 102595-02-M-1540