

BEFORE THE INSURANCE COMMISSIONER OF THE
STATE OF OKLAHOMA

FILED
MAY 14 2013
INSURANCE COMMISSIONER
OKLAHOMA

STATE OF OKLAHOMA, ex rel. JOHN)
D. DOAK, Insurance Commissioner,)
)
Petitioner,)
)
v.)
)
PATRICK NGANGA,)
an unlicensed producer,)
)
Respondent.)

Case No. 13-0480-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 undersigned attorney 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. Patrick Nganga is an Oklahoma producer employed at Benefit Designers in Oklahoma City, Oklahoma. His producer license 166331 lapsed on March 31, 2013. His address of record is 17617 Wain Bridge, Edmond, Oklahoma 73012.

ALLEGATIONS OF FACT

1. Respondent Patrick Nganga submitted an application to reinstate his producer license on May 6, 2013. The application stated under Respondent's employment history that he has been a producer at Benefit Designers in Oklahoma City, Oklahoma from February 2007 - May 2013.

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

3. Oklahoma Insurance Department records revealed that Respondent was issued producer license on 166331. The license became inactive on March 31 2013 due to a tax hold from the Oklahoma Tax Commission. Respondent requested reinstatement of his license on May 6, 2013.

4. Department records also showed that Respondent failed to disclose an Oklahoma administrative action on his reinstatement application from 2009.

5. Respondent was required to maintain an active license while employed as an producer with Benefit Designers between November 2012 – February 2013.

6. Respondent was required to disclose the 2009 administrative action on his reinstatement application.

CONCLUSIONS OF LAW

1. Respondent violated 36 O.S. § 1435.13(A)(1); providing incorrect, misleading, incomplete or materially untrue information in the license application.

2. Respondent violated 36 O.S. § 1435.4(A) in failing to maintain an active producer license while employed in an insurance-related business, thereby in violation of 36 O.S. § 1435.13(A)(2).

ORDER

IT IS THEREFORE ORDERED, ADJUDGED AND DECREED by the Insurance Commissioner, subject to the following paragraph, that the Respondent violated 36 O.S. § 1435.13(A)(1) and (2) 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 14th day of May 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 14th day of May, 2013 to:

Patrick Nganga
17617 Wain Bridge
Edmond, OK 73012

CERTIFIED MAIL NO: 7001 0320 0003 9967 9800

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 9967 9800

OFFICIAL USE

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



Total Postage €

Sent To **Patrick Nganga**
17617 Wain Bridge
Edmond, OK 73012

Street, Apt. No.,
or PO Box No. **13-0480-DIS/JAM(mt)Cond.Adm.Ord.**

City, State, ZIP+4

PS Form 3800, January 2001 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Patrick Nganga
17617 Wain Bridge
Edmond, OK 73012

13-0480-DIS/JAM(mt)Cond.Adm.Ord.

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Elizabeth Moritz Addressee

B. Received by (Printed Name) **ELIZABETH MORITZ** C. Date of Delivery **5-15-13**

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

RECEIVED
 ONLA... INSURANCE DEPARTMENT
 MAY 17 2013

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Transfer from service label) **7001 0320 0003 9967 9800**