

**BEFORE THE INSURANCE COMMISSIONER OF THE
STATE OF OKLAHOMA**

FILED
APR 27 2015
INSURANCE COMMISSIONER
OKLAHOMA

STATE OF OKLAHOMA, ex rel. JOHN
DOAK, Insurance Commissioner,

Petitioner,

v.

ALEX TRAN, a formerly licensed insurance
producer,

Respondent.

Case No. 15-0149-DIS

CONDITIONAL ADMINISTRATIVE ORDER
AND NOTICE OF RIGHT TO BE HEARD

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

JURISDICTION

1. John 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. Respondent was previously licensed by the State of Oklahoma as a resident insurance producer holding license number 0100146103. His address of record with the Oklahoma Insurance Department ("OID") is 10428 Walnut Hollow Dr., Oklahoma City, Oklahoma 73162.

3. The Insurance Commissioner may place on probation, censure, suspend, revoke or refuse to issue or renew a license issued pursuant to the Oklahoma Producer Licensing Act and/or may levy a fine up to \$1,000.00 for each occurrence of a violation of the Oklahoma Insurance Code, 36 O.S. § 1435.13(A) and (D).

ALLEGATIONS OF FACT

1. On or about November 7, 2012, Respondent applied for a resident insurance producer license with the OID. On the application form, the first question asks the following: “Have you ever been convicted of a crime, had a judgment withheld or deferred, or are you currently charged with committing a crime?” Respondent answered “no” to this question. A copy of Respondent’s application is attached as Petitioner’s Exhibit A.

2. The application form defines “crime” to include “a misdemeanor, a felony or a military offense.” “Convicted” is defined as “having been found guilty by verdict of a judge or jury, having entered a plea of guilty or nolo contendere or no contest, or having been given probation, a suspended sentence, or a fine.” The application states that individual applicants can only “exclude misdemeanor traffic citations and misdemeanor convictions or pending misdemeanor charges involving driving under the influence (DUI) or driving while intoxicated (DWI), driving without a license, reckless driving, or driving with a suspended or revoked license and juvenile offenses.”

3. On or about November 8, 2012, the OID, relying on the information submitted by Respondent in the license application, issued a producer license to Respondent.

4. On or about December 30, 2014, the OID Anti-Fraud Division received a complaint against Respondent. The complaint asserted that Respondent had been convicted of several felonies in the State of New York. OID Anti-Fraud Investigator Lewis Garrison (“Garrison”) initiated an investigation into Respondent.

5. Through the course of his investigation, Garrison discovered that Respondent had been terminated for cause by Farmers Insurance Company (“Farmers”). Farmers informed Garrison that Respondent was terminated after it learned that Respondent was a convicted felon.

6. After learning the details surrounding Respondent's termination from Farmers, Garrison contacted the State of New York Department of Corrections ("NYDOC"). On or about January 21, 2015, Garrison received a certified copy of Respondent's Certificate of Incarceration from the NYDOC. The Certificate of Incarceration shows that Respondent was convicted of the following felonies in the State of New York: Criminal Mischief 2nd; Grand Larceny- Not Auto 4th; Coercion 1st; Grand Larceny- Not Auto 2nd; Unlawful Duplication Comp Related Material; and Identity Theft 1st. Respondent was incarcerated for two years. A copy of the Certificate of Incarceration is attached as Petitioner's Exhibit B.

7. On or about February 2, 2015, Garrison and fellow OID Anti-Fraud Investigator Tyler Stiles ("Stiles") interviewed Respondent. During the course of the interview, Respondent admitted to his prior criminal history and incarceration.

8. Under 36 O.S. § 402(A), "[no] person who has been convicted of any criminal felony involving dishonesty or a breach of trust, or who has been convicted of an offense under Section 1033 of Title 18 of the United States Code, shall engage or participate in the business of insurance in this state or do any of the acts of an insurance business as set forth in Section 4 of this act." Respondent's criminal felony convictions for Criminal Mischief 2nd; Grand Larceny- Not Auto 4th; Coercion 1st; Grand Larceny- Not Auto 2nd; Unlawful Duplication Comp Related Material; and Identity Theft 1st are considered to be crimes involving dishonesty and/or breach of trust. Accordingly, Respondent is prohibited from engaging or participating the business of insurance in Oklahoma without the written consent of the Insurance Commissioner. 36 O.S. § 402(A) and (B).

ALLEGED VIOLATIONS 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. § 1435.13(A)(6); having been convicted of a felony.
3. Respondent violated 36 O.S. § 402(A); by engaging or participating in the business of insurance in this state after having been convicted of a felony involving dishonesty and/or breach of trust.

ORDER

IT IS THEREFORE ORDERED by the Insurance Commissioner that Alex Tran is **CENSURED** and **FINED ONE THOUSNAD DOLLARS (\$1,000.00)** for providing incorrect, misleading, incomplete or materially untrue information in the license application, having been convicted of a felony, and by engaging or participating in the business of insurance in this state after having been convicted of a felony involving dishonesty and/or breach of trust. **The \$1,000.00 fine is to be paid within thirty (30) days** made payable to the Oklahoma Insurance Department. The \$1,000.00 civil fine shall be paid by money order or cashier's check. Failure to pay the civil fine or request a hearing within thirty (30) days may result in further administrative action.

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 this Order. A request for hearing should be in writing addressed to Barron Brown, Oklahoma Insurance Department, Legal Division, 3625 NW

56th St., Suite 100, Oklahoma City, Oklahoma 73112. The request for hearing must state the grounds for the request to set aside or modify the Order.

Any such hearing shall be conducted according to the procedures for contested cases under the Insurance Code and 75 O.S. § 250-323. If the Respondent serves a timely request for hearing on the Oklahoma Insurance Department, this Conditional Order shall act as notice of the matters to be reviewed at the hearing, and the Allegations of Fact, Alleged Violations of Law, and penalties imposed in this Conditional Order shall be considered withdrawn, pending final resolution at the hearing.

WITNESS My Hand and Official Seal this 27th day of April, 2015.



JOHN DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA

Barron B. Brown

Barron B. Brown
Assistant General Counsel
3625 NW 56th St., Suite 100
Oklahoma City, OK 73112

CERTIFICATE OF MAILING

I, Barron B. Brown, 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 via regular mail and by certified mail, with postage prepaid and return receipt requested, on this 27th day of April, 2015, to:

Alex Tran
10428 Walnut Hollow Dr.
Oklahoma City, OK 73162

CERTIFIED MAIL NO. 7014 2870 0000 5493 1869

and a copy was delivered to:

Karen Wojtek
Licensing Division

and a copy was delivered to:

Lewis Garrison
Anti-Fraud Division



Barron B. Brown
Assistant General Counsel

7014 2870 0000 5493 1869

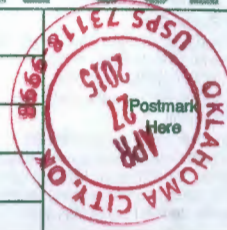
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(Endorsement Required)
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(Endorsement Required)
Total Postage & Fees \$



Sent To
Street & Apt. No.,
or PO Box No.
City, State, ZIP+4

Alex Tran
10428 Walnut Hollow Dr.
Oklahoma City, OK 73162
rlg/15-0149-DIS/Cond. Adm. Ord.

PS Form 3800, July 2014



JOHN D. DOAK

Insurance Commissioner
Oklahoma Insurance Department
5 Corporate Plaza
3625 N.W. 56th St., Ste. #100
Oklahoma City, OK 73112-4511

CERTIFIED MAIL®



7014 2870 0000 5493 1869

2015 MAY 30 AM 10 34

RECEIVED
OKLAHOMA INSURANCE DEPARTMENT

JUN 02 2015

Legal Division



Alex Tran
10428 Walnut Hollow Dr.
Oklahoma City, OK 73162

neopost

04/27/2015

US POSTAGE

FIRST-CLASS MAIL

\$008.03⁰



ZIP 73112
041L12203132

7316293220 03542

NIXIE 731 DE 1700 0005/28/15
RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD
BC: 73112451125 *0357-04344-27-38

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

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7014 2870 0000 5493 1869

Postage	\$
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Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



Sent to
Street & Apt. No.,
or PO Box No.
City, State, ZIP+4

Alex Tran
10428 Walnut Hollow Dr.
Oklahoma City, OK 73162
rfg/15-0149-DIS/Cond. Adm. Ord.

PS Form 3800, July 2014

UNITED STATES POSTAL SERVICE
MAILING AND DELIVERY PERMIT NO. 1001 OKLAHOMA CITY, OK 73101

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:

Alex Tran
10428 Walnut Hollow Dr.
Oklahoma City, OK 73162
rfg/15-0149-DIS/Cond. Adm. Ord.

OKLAHOMA INSURANCE

JUN 02 2015

Legal Division

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ X

B. Received by (Printed Name)

☐ Agent
☐ Addressee

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail®
- ☐ Registered
- ☐ Insured Mail
- ☐ Priority Mail Express™
- ☐ Return Receipt for Merchandise
- ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

2. Article Number
(Transfer from service label)

7014 2870 0000 5493 1869

PS Form 3811, July 2013

Domestic Return Receipt

Home About NIPR Search Contacts/Help



Return to Gateway View Search Results View XML Format View PIN Format Search Again Logout

Tran, Alex

Trans. Type: Resident License
 NIPR Trans: 420734519
Check I-SITE Listing
 SSN: XXX-XX-5767
 Date of Birth: 01/27/1980
 Gender: M
 Resident State: OK
 Res. License Class: Producer
 Nationality: U.S.A.

Applicant Info**Business Address:**

10428 WALNUT HOLLOW DR
 OKLAHOMA CITY, OK 73162
 U.S.A.

Mailing Address:

10428 WALNUT HOLLOW DR
 OKLAHOMA CITY, OK 73162
 U.S.A.

Residence Address:

10428 WALNUT HOLLOW DR
 OKLAHOMA CITY, OK 73162
 U.S.A.

Applicant Info Cont.**Individual Applicant E-mail Address:**

ALEXANDERQTRAN@GMAIL.COM

Business E-mail Address:

ALEXANDERQTRAN@GMAIL.COM

Business Phone #:

(405) 843-8430

Residence Phone #:

(405) 301-2550

Employment History

Employer	Employment Dates	Position	Location	Country
KIMS TAILOR AND NAILS	April 2003 -November 2012	PR/ACCOUNT	OKC, OK	U.S.A.

Background Questions

1: Have you ever been convicted of a crime, had a judgment withheld or deferred, or are you currently charged with committing a crime? Note: "Crime" includes a misdemeanor, a felony or a military offense. You may exclude misdemeanor traffic citations and misdemeanor convictions or pending misdemeanor charges involving driving under the influence (DUI) or driving while intoxicated (DWI), driving without a license, reckless driving, or driving with a suspended or revoked license and juvenile offenses. "Convicted" includes, but is not limited to, having been found guilty by verdict of a judge or jury, having entered a plea of guilty or nolo contendere or no contest, or having been given probation, a suspended sentence, or a fine. If you answer yes, you must attach to this application: a) a written statement explaining the circumstances of each incident, b) a copy of the charging document, c) a copy of the official document, which demonstrates the resolution of the charges or any final judgment.

No

1A: If you have a felony conviction involving dishonesty or breach of trust, have you applied for written consent to engage in the business of insurance in your home state as required by 18 USC 1033?

NA

1B: If so, was consent granted? (Attach copy of 1033 consent approved by home state.)

NA

2: Have you ever been named or involved as a party in an administrative proceeding, including FINRA sanction or arbitration proceeding regarding any professional or occupational license or registration? "Involved" means having a license censured, suspended, revoked, canceled, terminated; or, being assessed a fine, a cease and desist order, a prohibition order, a compliance order, placed on probation, sanctioned or surrendering a license to resolve an administrative action. "Involved" also means being named as a party to an administrative or arbitration proceeding, which is related to a professional or occupational license, or registration. "Involved" also means having a license, or registration application denied or the act of withdrawing an application to avoid a denial. INCLUDE any business so named because of your actions, in your capacity as an owner, partner, officer or director, or member or manager of a Limited Liability Company. You may EXCLUDE terminations due solely to noncompliance with continuing education requirements or failure to pay a renewal fee. If you answer yes, you must attach to this application: a) a written statement identifying the type of license and explaining the circumstances of each incident, b) a copy of the Notice of Hearing or other document that states the charges and allegations, and c) a copy of the official document, which demonstrates the resolution of the charges or any final judgment.

No

3: Has any demand been made or judgment rendered against you or any business in which you are or were an owner, partner, officer or director, or member or manager of a limited liability company, for overdue monies by an insurer, insured or producer, or have you ever been subject to a bankruptcy proceeding? Do not include personal bankruptcies, unless they involve funds held on behalf of others. If you answer yes, submit a statement summarizing the details of the indebtedness and arrangements for repayment, and/or type and location of bankruptcy.

No

4: Have you been notified by any jurisdiction to which you are applying of any delinquent tax obligation that is not the subject of a repayment agreement? If you answer yes, identify the jurisdiction(s):

No

5: Are you currently a party to, or have you ever been found liable in, any lawsuit, arbitrations or mediation proceeding involving allegations of fraud, misappropriation or conversion of funds, misrepresentation or breach of fiduciary duty? If you answer yes, you must attach to this application: a) a written statement summarizing the details of each incident, b) a copy of the Petition, Complaint or other document that

commenced the lawsuit or arbitration, or mediation proceedings, and c) a copy of the official documents, which demonstrates the resolution of the charges or any final judgment.

No

6: Have you or any business in which you are or were an owner, partner, officer or director, or member or manager of a limited liability company, ever had an insurance agency contract or any other business relationship with an insurance company terminated for any alleged misconduct? If you answer yes, you must attach to this application: a) a written statement summarizing the details of each incident and explaining why you feel this incident should not prevent you from receiving an insurance license, and b) copies of all relevant documents.

No

7: Do you have a child support obligation in arrearage?

No

8: In response to a "yes" answer to one or more of the Background Questions for this application, are you submitting document(s) to the NAIC/NIPR Attachments Warehouse?

NA

- Attestation

1: I hereby certify that, under penalty of perjury, all of the information submitted in this application and attachments is true and complete. I am aware that submitting false information or omitting pertinent or material information in connection with this application is grounds for license revocation or denial of the license and may subject me to civil or criminal penalties.

2: Unless provided otherwise by law or regulation of the jurisdiction, I hereby designate the Commissioner, Director or Superintendent of Insurance, or other appropriate party in each jurisdiction for which this application is made to be my agent for service of process regarding all insurance matters in the respective jurisdiction and agree that service upon the Commissioner, Director or Superintendent of Insurance, or other appropriate party of that jurisdiction is of the same legal force and validity as personal service upon myself.

3: I further certify that I grant permission to the Commissioner, Director or Superintendent of Insurance, or other appropriate party in each jurisdiction for which this application is made to verify information with any federal, state or local government agency, current or former employer, or insurance company.

4: I further certify that, under penalty of perjury, either a) I have no child-support obligation, or b) I have a child-support obligation and I am currently in compliance with that obligation, or c) I have identified my child support obligation arrearage on this application.

5: I authorize the jurisdictions to which this application is made to give any information concerning me, as permitted by law, to any federal, state or municipal agency, or any other organization and I release the jurisdictions and any person acting on their behalf from any and all liability of whatever nature by reason of furnishing such information.

6: I acknowledge that I understand and will comply with the insurance laws and regulations of the jurisdictions to which I am applying for licensure.

7: For Non-Resident License Applications, I certify that I am licensed and in good standing in my home state/resident state for the lines of authority requested from the non-resident state.

8: I hereby certify that upon request, I will furnish the jurisdiction(s) to which I am applying, certified copies of any documents attached to this application or requested by the jurisdiction(s).

Applicants Certification and Attestation: Yes

Authorizing Officer

Submitter: Producer

Contact Information

Name: ALEX TRAN

Business E-mail Address: ALEXANDERQTRAN@GMAIL.COM

Transaction Information

State: OK

State Fee: \$66.99

Date Sent: 11/07/2012

Trans Fee: \$5.00

Validation: Pass

Payment Method: Credit Card

Status: **Processed**

Customer: 83ERL

Customer Batch: EQEP7C444BE4

Customer Trans#: 9439995

Licenses/Lines of Authority

License Class	Effective Date	Renew Date	Accepted	Comment Code	Comments
Producer	11/08/2012		Yes		
Lines of Authority					
Line of Authority	Effective Date	Renew Date	Accepted	Comment Code	Comments
Casualty	11/08/2012		Yes		
Property	11/08/2012		Yes		

- File Information

File Status	File Name	Date/Time
Transaction Sent to State		11/08/2012 03:30:40
Transaction Sent to State		11/08/2012 03:28:53

Intermediate Responses

License Class	IR Sent	Action Req'd	Comment Code	Comments
Producer	Yes	No	53546	Application has been deferred for state review.
Producer	Yes	No	53546	Application has been deferred for state review.
Lines of Authority				
No Intermediate Responses for Lines of Authority to display.				

Audit Information

Date	Comments
11/08/2012 09:41:44	Emailed completed transaction to ALEXANDERQTRAN@GMAIL.COM
11/08/2012 09:24:09	State Interface - User: OK364 -- Transaction released
11/07/2012 05:41:14	Emailed intermediate response to ALEXANDERQTRAN@GMAIL.COM
11/07/2012 05:21:37	Emailed intermediate response to ALEXANDERQTRAN@GMAIL.COM

NEW YORK STATE DEPARTMENT OF CORRECTIONS AND COMMUNITY
SUPERVISION
WILLARD DRUG TREATMENT CAMPUS
CERTIFICATE OF INCARCERATION



STATE OF NEW YORK
COUNTY OF SENECA

I, Rickey A. Bartlett, Superintendent of Willard Drug Treatment Campus of the New York State Department of Corrections and Community Supervision, do hereby certify that it appears from an examination of the records on file in the Department that:

TRAN, Viet Quoc; NYSID #02591800J, DIN #08R2828, DOB 01/27/80, was convicted in Supreme Court, County of New York, of Criminal Mischief 2nd; Grand Larceny-Not Auto 4th; Coercion 1st; Grand Larceny-Not Auto 2nd; Unlawful Duplication Comp Related Material; and Identity Theft 1st; and was sentenced on 7/07/08 to: indeterminate terms of incarceration of: 1-06-00 to 4-06-00; 1-04-00 to 4-00; 1-06-00 to 4-06-00; 1-06-00 to 4-06-00; 1-04-00 to 4-00-00 and 1-06-00 to 4-06-00 years (all to run concurrent).

FROM	TO
08/25/08	08/03/10
04/28/11*	08/16/11

Restored to parole supervision at the Willard Drug Treatment campus – see Criminal Procedure Law 410.91 and Correction Law 70(1)(c).

As evidence thereof, I have hereunto set my hand and affixed the seal of the New York State Department of Corrections and Community Supervision this
15th day of January, 2015.

A handwritten signature in black ink, reading "Rickey A. Bartlett", written over a horizontal line.

NOTE: THIS CERTIFICATE DOES NOT CONTAIN REFERENCES TO ANY YOUTHFUL OFFENDER ADJUDICATIONS WHICH MAY OR MAY NOT BE APPLICABLE TO THE INDIVIDUAL WHO IS THE SUBJECT OF THIS CERTIFICATE.