

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

**FILED**  
MAY 20 2016  
INSURANCE COMMISSIONER  
OKLAHOMA

**STATE OF OKLAHOMA, ex rel. JOHN DOAK, Insurance Commissioner,** )  
 )  
 )  
 **Petitioner,** )  
 )  
 )  
 **v.** )  
 )  
 **JONATHAN TURNER,** )  
 **an applicant for a resident** )  
 **insurance producer license,** )  
 )  
 )  
 **Respondent.** )

**Case No. 16-0701-DEN**

**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, Dan R. Byrd, 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 is an applicant for a resident insurance producer license in the State of Oklahoma. Respondent's address of record is 1811 9<sup>th</sup> Street, Woodward, OK 73801.

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. Respondent applied for a resident insurance producer license on or about July 18, 2016 with the Oklahoma Insurance Department (OID). On the application form, question 1A asks the following: “Have you ever been convicted of a misdemeanor, had a judgment withheld or deferred, or are you currently charged with committing a misdemeanor?” Respondent answered “no” to this question.

2. The application provides that individual applicants can only exclude “the following misdemeanor convictions or pending misdemeanor charges: traffic citations, driving under the influence (DUI), driving while intoxicated (DWI), driving without a license, reckless driving, or driving with a suspended or revoked license.” Applicants are also permitted to “exclude juvenile adjudications (offenses where you were adjudicated delinquent in a juvenile court).”

3. An On Demand Court Records (ODCR) background check by the OID Licensing Division showed that Respondent had the following on his record in the State of Oklahoma: a plea of guilty to a misdemeanor for possession of controlled substance – marijuana in Ellis County District Court Case No. CM-2009-8 with the offense occurring on or about January 30, 2009. On February 17, 2009, Respondent received a one year suspended sentence on the misdemeanor charge for possession of controlled substance - marijuana, plus he was ordered to pay fines and court costs. Respondent did not disclose this prior criminal history in the license application.

### **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.

## ORDER

**IT IS THEREFORE ORDERED** by the Insurance Commissioner that Jonathan Turner is **FINED TWO HUNDRED DOLLARS (\$200.00)** for providing incorrect, misleading, incomplete or materially untrue information in the license application. **The \$200.00 fine is to be paid within thirty (30) days** made payable to the Oklahoma Insurance Department. The \$200.00 civil fine shall be paid by money order or cashiers check. Respondent's application for a resident insurance producer license may be granted upon receipt of payment of the fine and reporting of the administrative action. Failure to pay the civil fine or request a hearing within thirty (30) days will result in your license application being withdrawn.

**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 Dan R. Byrd, Oklahoma Insurance Department, Legal Division, 3625 NW 56<sup>th</sup> 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.

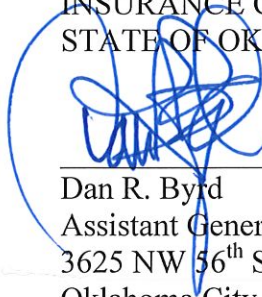
Any such hearing shall be conducted according to the procedures for contested cases under the Insurance Code and 75 O.S. § 250-323. If the Respondent serves a timely request for hearing on the Oklahoma Insurance Department, this Conditional Order shall act as notice of the matters to be reviewed at the 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 20<sup>th</sup> day of July, 2016.



JOHN DOAK  
INSURANCE COMMISSIONER  
STATE OF OKLAHOMA

  
\_\_\_\_\_  
Dan R. Byrd  
Assistant General Counsel  
3625 NW 56<sup>th</sup> St., Suite 100  
Oklahoma City, OK 73112

**CERTIFICATE OF MAILING**

I, Dan R. Byrd, 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 20<sup>th</sup> day of July, 2016 to:

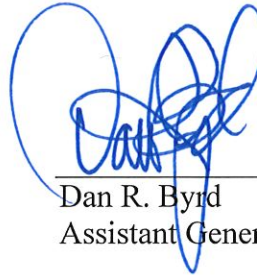
Jonathan Turner  
1811 9<sup>th</sup> Street  
Woodward, OK 73801

**CERTIFIED MAIL NO.**

**7015 3010 0001 4736 9489**

and a copy was delivered to:

Karen Wojtek  
Licensing Division



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Dan R. Byrd  
Assistant General Counsel

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Adult Signature Required \$ \_\_\_\_\_

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Jonathan Turner  
 1811 9TH Street  
 Woodward, OK 73801  
**16-0701-DEN/DRB(mt)**  
**(Cond. Adm. Ord. & Notice ~7-20-16)**

PS Form 3800, April 2015 PSN 7530-02-000-9047

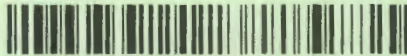
See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:

Jonathan Turner  
 1811 9TH Street  
 Woodward, OK 73801  
**16-0701-DEN/DRB(mt)**  
**(Cond. Adm. Ord. & Notice ~7-20-16)**



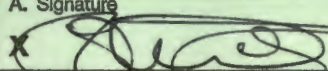
9590 9402 1900 6104 3894 36

2. Article Number (Transfer from service label)

7015 3010 0001 4736 9489

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
  Agent  
 Addressee

B. Received by (Printed Name) \_\_\_\_\_ C. Date of Delivery  
 7-25-16

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

RECEIVED  
 OKLAHOMA INSURANCE DEPARTMENT  
 JUL 28 2016

Legal Division

3. Service Type

Adult Signature  Priority Mail Express®

Adult Signature Restricted Delivery  Registered Mail™

Certified Mail®  Registered Mail Restricted Delivery

Certified Mail Restricted Delivery  Return Receipt for Merchandise

Collect on Delivery  Signature Confirmation™

Collect on Delivery Restricted Delivery  Signature Confirmation Restricted Delivery

Insured Mail  Signature Confirmation Restricted Delivery (over \$500)

Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt