

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

FILED

OCT 19 2016

INSURANCE COMMISSIONER
OKLAHOMA

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

Case No. 16-0935-DEN

**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 counsel, Barron B. Brown, 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., including the Producer Licensing Act, 36 O.S. §§ 1435.1-1435.41.
2. Avery Sanderson (“Respondent”) is an applicant for a resident insurance producer license in the State of Oklahoma. Respondent’s mailing address of record is 1412 Victoria Place, Edmond, Oklahoma 73003.
3. The Insurance Commissioner may place on probation, censure, suspend, revoke or refuse to issue or renew a license issued pursuant to the 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 September 27, 2016, Respondent applied for a resident insurance producer license with the Oklahoma Insurance Department (“OID”). On the application form, question 1B asks the following: “Have you ever been convicted of a felony, had a judgment withheld or deferred, or are you currently charged with committing a felony?” 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 Oklahoma State Courts Network (“OSCN”) background check by the OID Licensing Division showed that Respondent had the following on his record in the State of Oklahoma: a guilty plea to criminal felony charges of driving while under the influence, minor in possession of alcohol, and driving while privilege revoked, which resulted in Respondent being placed into the delayed sentencing program for young adults, on or about August 10, 2016 (Oklahoma County, Case No. CF-2014-7770).

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 Respondent is

FINED THREE HUNDRED DOLLARS (\$300.00) for a violation of 36 O.S. § 1435.13(A)(1). **The \$300.00 fine is to be paid within thirty (30) days** made payable to the Oklahoma Insurance Department. The \$300.00 civil fine shall be paid by money order or cashier's 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 Barron B. 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 19th day of October, 2016.

JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA



Barron B. Brown

Barron B. Brown
Assistant General Counsel
Oklahoma Insurance Department
3625 NW 56th St., Suite 100
Oklahoma City, OK 73112
(405) 521-2746

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 by certified mail, with postage prepaid and return receipt requested, on this 19th day of October, 2016, to:

Avery Sanderson
1412 Victoria Place
Edmond, OK 73003

CERTIFIED MAIL NO. 7016 0910 0000 5833 5824

and a copy was delivered to:

Karen Wojtek
Licensing Division

Barron B. Brown

Barron B. Brown
Assistant General Counsel

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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Postage \$ _____

Total Postage and Fees \$ _____



Sent To Avery Sanderson
 1412 Victoria Pl.
 Edmond, OK 73003
 Street and Apt. No., or PO Box®
 rlg/16-0935-DEN(BBB)/Cond Adm Ord
 City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7500-02-000-9053

7016 0910 0000 5833 5824

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:

Avery Sanderson
 1412 Victoria Pl.
 Edmond, OK 73003
 rlg/16-0935-DEN(BBB)/Cond Adm Ord



9590 9402 1736 6074 9348 48

2. Article Number (Transfer from service label)

7016 0910 0000 5833 5824

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Emily Hoyer* Agent Addressee

B. Received by (Printed Name) *Emily Hoyer* C. Date of Delivery *10-20-16*

D. Is delivery address different from item 1? Yes No
 RECEIVED Enter delivery address below:

OKLAHOMA INSURANCE DEPARTMENT
 OCT 24 2016
 Legal Division

3. Service Type

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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

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