

BEFORE THE INSURANCE COMMISSIONER OF THE
STATE OF OKLAHOMA

STATE OF OKLAHOMA, ex rel. GLEN)
MULREADY, Insurance Commissioner,)
)
Petitioner,)
vs.)
)
SEAN PATRICK HAYES, a renewal applicant)
for a non-resident insurance adjuster license)
)
Respondent.)

CASE NO. 19-0763-DIS

FILED

JAN 03 2020

INSURANCE COMMISSIONER
OKLAHOMA

CONDITIONAL ADMINISTRATIVE ORDER
AND NOTICE OF RIGHT TO BE HEARD

COMES NOW the State of Oklahoma, ex rel. Glen Mulready, Insurance Commissioner, by and through counsel, Sandra G. LaVenue, and alleges and states as follows:

JURISDICTION AND AUTHORITY

1. Glen Mulready is the Insurance Commissioner of the State of Oklahoma and as such is charged with the duty of administering and enforcing all provisions of the Oklahoma Insurance Code, 36 O.S. §§ 101 *et seq.*, including the Oklahoma Insurance Adjusters Licensing Act, 36 O.S. §§ 6201-6223.

2. Sean Patrick Hayes ("Respondent") is a renewal applicant for a non-resident insurance adjuster license in the State of Oklahoma. Respondent's mailing address of record is P.O. Box 2348, Cincinnati, Ohio 45201-2348.

3. The Insurance Commissioner may censure, suspend, revoke, or refuse to issue or renew a license issued pursuant to the Oklahoma Insurance Adjuster Licensing Act and/or may levy a fine up to \$1,000.00 for each occurrence of a violation of the

Oklahoma Insurance Code pursuant to 36 O.S. § 6220(A) and (B).

4. If Respondent requests a hearing in writing in this matter, pursuant to OAC 365:1-7-1, the Insurance Commissioner, pursuant to 36 O.S. § 319, will appoint an independent hearing examiner who shall sit as a quasi-judicial officer and preside over the hearing requested by Respondent.

5. The Insurance Commissioner, pursuant to OAC 365:1-7-5, upon written request reasonably made by a person affected by the hearing and at such person's expense, shall cause a full stenographic record of the proceedings to be made by a competent court reporter.

ALLEGATIONS OF FACTS

6. Respondent's Oklahoma Insurance Department's ("OID") non-resident adjuster license expired on or about March 31, 2016.

7. Respondent submitted a renewal application on October 30, 2019.

8. On November 1, 2019, the OID Licensing Division requested information regarding the adjustment of Oklahoma claims after the expiration of Respondent's License on March 31, 2016.

9. On or about November 5, 2019, Respondent's manager provided a response stating that to the best of his knowledge, Respondent had adjusted only one Oklahoma claim after Respondent's license expired on March 31, 2016.

10. The OID Licensing Division requested that Respondent's records be checked and further requested a report subsequent to a review of Respondent's records.

11. On or about November 22, 2019, Respondent's manager reported that Respondent had actually worked 12 Oklahoma claims with an expired license.

ALLEGED CONCLUSIONS OF LAW

12. Respondent has violated 36 O.S. § 6220(A)(9) on 12 occasions by adjusting claims without proper licensure from the Oklahoma Insurance Commissioner.

ORDER

IT IS THEREFORE ORDERED, ADJUDGED AND DECREED by the Insurance Commissioner, subject to the following paragraph, that Respondent is hereby **CENSURED** and **FINED SIX HUNDRED DOLLARS (\$600.00)** for violations of 36 O.S. § 6220(A)(9). The **\$600.00 fine is to be paid within thirty (30) days** of this Conditional Administrative Order and made payable to the Oklahoma Insurance Department. Respondent's application for the renewal of his non-resident insurance adjuster license shall be granted upon receipt of payment of the fine. Failure to pay the civil fine or request a hearing within thirty (30) days will result in your renewal license application being withdrawn.

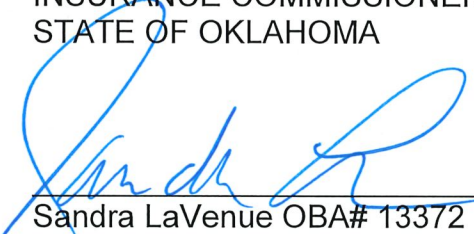
IT IS FURTHER ORDERED, ADJUDGED AND DECREED by the Insurance Commissioner that this Order is a Conditional Order. Unless Respondent requests a hearing with respect to the Allegations of Fact set forth above within thirty (30) days of mailing of this Order, this Order and the penalties set forth above shall become a Final Order on the thirty-first (31st) day following the mailing of this Order. A request for hearing shall be in writing and addressed to Sandra LaVenue, Oklahoma Insurance Department, Legal Division, 3625 NW 56th St., Suite 100, Oklahoma City, Oklahoma 73112. Additionally, the request for hearing shall state the grounds for the request to set aside or modify the Order. The request shall be served on the Oklahoma Insurance Department within the thirty (30) days allotted. The proceedings on 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* 323. If Respondent serves a timely request for hearing on the Oklahoma Insurance Department, this Conditional Order shall act as a 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 3rd day of January 2020.



GLEN MULREADY
INSURANCE COMMISSIONER
STATE OF OKLAHOMA


Sandra LaVenue OBA# 13372
Oklahoma Insurance Department
3625 NW 56th Street, Suite 100
Oklahoma City, Oklahoma 73112
(405) 521-2746

CERTIFICATE OF MAILING

I, Sandra LaVenue, 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 to Cortney Gayer on this 31st day of January 2020, to:

Sean Patrick Hayes
P.O. Box 2348
Cincinnati, OH 45201-2348

CERTIFIED MAIL NO. 9214 8902 0982 7500 0266 19

and a copy was delivered to:
Brandon Brummett
Licensing Division



Sandra LaVenue
Senior Counsel

Date Produced: 01/13/2020

OKLAHOMA INSURANCE DEPARTMENT:

The following is the delivery information for Certified Mail™/RRE item number 9214 8902 0982 7500 0266 19. Our records indicate that this item was delivered on 01/06/2020 at 01:26 p.m. in CINCINNATI, OH 45201. The scanned image of the recipient information is provided below.

Signature of Recipient :

Delivery Section

•	<i>Matt Muench</i>
1	Matt Muench

Address of Recipient :

2	Great American
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Thank you for selecting the Postal Service for your mailing needs. If you require additional assistance, please contact your local post office or Postal Service representative.

Sincerely,
United States Postal Service

The customer reference number shown below is not validated or endorsed by the United States Postal Service. It is solely for customer use.

This USPS proof of delivery is linked to the customers mail piece information on file as shown below:

SEAN PATRICK HAYES
PO BOX 2348
CINCINNATI OH 45201-2348

Customer Reference Number: C1829539.10504984

Return Reference Number: SMS/19-0763-DIS (SGL)/Cond Ord.

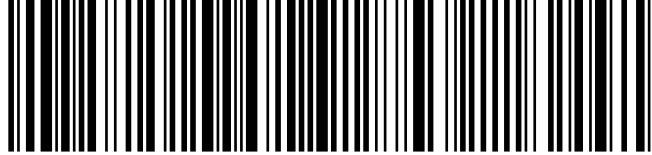
**Return address:**

OKLAHOMA INSURANCE DEPARTMENT
5 CORPORATE PLAZA
OKLAHOMA CITY, OK 73112

Recipient address:

SEAN PATRICK HAYES
PO BOX 2348
CINCINNATI OH 45201-2348

MAILING DATE: 01/03/2020
DELIVERY DATE: 01/06/2020

USPS CERTIFIED MAIL

9214 8902 0982 7500 0266 19

USPS Tracking Label Number: 9214 8902 0982 7500 0266 19

USPS Tracking History	Location	Date / Time
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ORIGIN ACCEPTANCE	OKLAHOMA CITY,OK 73112	01/03/2020 22:41
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ARRIVAL AT UNIT	CINCINNATI,OH 45202	01/06/2020 10:59
AVAILABLE FOR PICKUP	CINCINNATI,OH 45201	01/06/2020 11:00
DELIVERED TO AGENT	CINCINNATI,OH 45201	01/06/2020 13:26

CASE NUMBER: 19-0763-DIS

DEPARTMENT: LEGAL/SGL

SENDER: SMS

CUSTOM 4: CONDITIONAL ADMINISTRATIVE ORDER & NOTICE OF RIGHT TO BE HEARD