

BEFORE THE INSURANCE COMMISSIONER OF THE  
STATE OF OKLAHOMA

**FILED**  
**JUL 02 2019**  
INSURANCE COMMISSIONER  
OKLAHOMA

STATE OF OKLAHOMA, ex rel. GLEN )  
MULREADY, Insurance Commissioner, )  
 )  
Petitioner, )  
v. )  
 )  
ICA, LP, a non-resident, )  
insurance adjuster, )  
 )  
Respondent. )

Case No. 19-0417-DIS

**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 his attorney, Sara A. Worten, and alleges and states as follows:

**JURISDICTION**

1. Glen Mulready 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 ICA, LP (“Respondent”) is an applicant for reinstatement of its non-resident insurance adjuster license. Its address of record is 11405 N. Community House Road, Suite 400, North Carolina 28277.

3. The Insurance Commissioner may place on probation, censure, suspend, revoke or refuse to issue or renew a license issued pursuant to the Oklahoma Insurance Adjusters Licensing Act and may levy a fine up to \$1,000.00 for each occurrence of a violation of the Oklahoma Insurance Code, 36 O.S. §§ 6217, 6220(A) and (B).

### FINDINGS OF FACT

1. Respondent's designated licensed adjuster is John Hunter. Mr. Hunter submitted an application to reinstate its business entity adjuster license on June 14, 2019.
2. Pursuant to *36 O.S. § 6217* an insurance adjuster license is due for renewal 24 months after its issuance. Oklahoma Insurance Department's records show that Respondent's license became inactive on April 30, 2019 for failing to renew.
3. Respondent continued to adjust losses or negotiate claim settlements from May 1, to June 14, 2019 on 56 matters.
4. It is a violation of the Oklahoma Insurance Adjusters Licensing Act to act as an adjuster with an expired license. *36 O.S. § 6220*.

### CONCLUSIONS OF LAW

1. Respondent violated *36 O.S. § 6220(A)(9)* for adjusting losses or negotiating claim settlements arising pursuant to provisions of insurance contracts on behalf of an insurer or insured without proper licensing from the Commissioner from May 1, 2019 to June 14, 2019.

### ORDER

**IT IS THEREFORE ORDERED, ADJUDGED AND DECREED** by the Insurance Commissioner, subject to the following paragraph, that the Respondent violated *36 O.S. § 6220(A)(9)* and as a result **Respondent is FINED** in the amount of **\$100.00**. **The Fine is to be paid within 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 30 days of the date of mailing of this Order, this Order and the penalties set forth above will become a Final Order on the thirty-


first day following the date of mailing this Order. A request for hearing must be in writing addressed to Sara A. Worten, Oklahoma Insurance Department, Legal Division, 3625 NW 56<sup>th</sup> Street, 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 will 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 will act as notice of the matters to be reviewed at the hearing, and the Findings of Fact, Conclusions of Law, and penalties imposed in this Conditional Order will be considered withdrawn, pending final resolution at the hearing.

WITNESS My Hand and Official Seal this 2nd day of July 2019.



GLEN MULREADY  
INSURANCE COMMISSIONER  
STATE OF OKLAHOMA

  
Sara A. Worten  
Assistant General Counsel  
3625 NW 56<sup>th</sup> Street, Suite 100  
Oklahoma City, OK 73112  
Telephone: (405) 521-2746

**CERTIFICATE OF MAILING**

I, Sara A. Worten, hereby certify that a true and correct copy of the above and foregoing Conditional Administrative Order and Notice of Right to be Heard was sent by certified mail with postage prepaid and return receipt requested on this <sup>2nd</sup> day of July 2019 to:

ICA, LP  
C/O John Hunter  
11405 N. Community House Rd.  
Suite 400  
Charlotte, NC 28277

**CERTIFIED MAIL NO.**  
**9214 8902 0982 7500 0219 73**

and

Notification was sent to:

All Appointing Insurers/RIRS

and

a copy was delivered to:

Licensing Division

  
Sara Worten