

STATE OF INDIANA)
) SS:
COUNTY OF MARION)

BEFORE THE INDIANA
COMMISSIONER OF INSURANCE
CAUSE NO.: 12513-AD13-1113-032

IN THE MATTER OF:)
)
INSURANCE AGENT LICENSE)
APPLICATION OF:)
)
Ernest W. Sisson)
2957 S. East Street)
Indianapolis, IN 46225)

FILED

NOV 22 2013

STATE OF INDIANA
DEPT. OF INSURANCE

PRELIMINARY ADMINISTRATIVE ORDER
AND NOTICE OF LICENSE DENIAL

The Indiana Department of Insurance (“Department”), pursuant to the Indiana Administrative Orders and Procedures Act, Ind. Code § 4-21.5-3-5 and Ind. Code § 27-1-15.6-12, hereby gives notice to **Ernest W. Sisson** (“Applicant”) that his application for a resident producer license is denied pursuant to the following Administrative Order:

1. Applicant filed an application for licensure with the Department on or about September 30, 2013. Upon review of the documents and information Applicant submitted contemporaneous with his application, the Commissioner of the Department (“Commissioner”) being fully advised, now hereby notifies Applicant that he has engaged in conduct giving the Commissioner cause to refuse to issue an insurance producer’s license as stated by Ind. Code § 27-1-15.6-12(b); specifically, Applicant improperly used notes or other reference material to complete an examination for an insurance license, in violation of IC § 27-1-15.6-12(b)(11).

2. Pursuant to Ind. Code § 27-1-15.6-12(d), if the Commissioner refuses to renew a license or denies an application for a license, the Commissioner must notify the applicant in writing of the reason for the denial of the applicant's application.

3. Applicant may, not more than sixty-three (63) days after notice of denial is mailed, make written demand to the Commissioner for a hearing before the Commissioner to determine the reasonableness of the Commissioner's action. The hearing will be held not more than thirty (30) days after Applicant's demand, and will be conducted under Ind. Code 4-21.

IT IS THEREFORE ORDERED that Applicant's request for licensure is hereby **DENIED** pursuant to Ind. Code § 27-1-15.6-12(b).

11/22/13
Date Signed


Stephen W. Robertson
Commissioner
Indiana Department of Insurance

CERTIFIED MAIL: 9214 8901 0661 5400 0024 6668 51
RETURN RECEIPT REQUESTED