

STATE OF INDIANA )  
 ) SS:  
COUNTY OF MARION )

BEFORE THE INDIANA  
COMMISSIONER OF INSURANCE

Cause No.: 13512-AD14-1205-034

IN THE MATTER OF: )  
 )  
INSURANCE PRODUCER LICENSE )  
APPLICATION OF: )  
 )  
Austin T. McFarland, )  
Applicant. )  
 )  
10178 Lakewood Dr. )  
Zionsville, IN 46077 )

**FILED**

DEC 19 2014

STATE OF INDIANA  
DEPT. OF INSURANCE

**PRELIMINARY ADMINISTRATIVE ORDER**  
**AND NOTICE OF LICENSE DENIAL**

The Indiana Department of Insurance, pursuant to the Indiana Administrative Act, Indiana Code §4-21.5-1 et seq. and Indiana Code §27-1-15.6-12, hereby gives notice to Austin T. McFarland (“Applicant”) of the following Administrative Order:

1. Applicant filed an application for licensure with the Commissioner of the Indiana Department of Insurance, (“Commissioner”), on November 23, 2014.
2. Before approving an application, the Commissioner must find that the applicant has met specific requirements under Indiana Code §27-1-15.6-6 and Indiana Code §27-1-15.6-12.
3. Indiana Code §27-1-15.6-12(b) provides, in part, that the Commissioner may refuse to issue or renew an insurance producer license for having been convicted of a felony and for providing incorrect or incomplete information on a license application.
4. Following a review of materials submitted by Applicant in support of his application, the Commissioner being fully advised, now hereby notifies Applicant that he has not fully

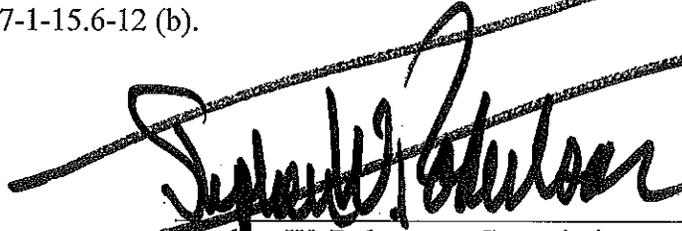
met the requirements of licensure as stated by Indiana Code §27-1-15.6-12 due to his prior felony conviction and his failure to disclose his prior misdemeanor conviction.

5. Indiana Code §27-1-15.6-12(d) provides that the applicant or licensee may, not more than sixty-three (63) days after notice of denial of the applicant's application or non renewal of the licensee's license is mailed, make written demand to the commissioner for a hearing before the commissioner to determine the reasonableness of the commissioner's action.

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

12-19-14

Date Signed

  
Stephen W. Robertson, Commissioner  
Indiana Department of Insurance

Distribution:

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**CERTIFIED MAIL RECEIPT: 9214 8901 0661 5400 0045 0056 91**