

STATE OF INDIANA)
) SS:
COUNTY OF MARION)

BEFORE THE INDIANA
COMMISSIONER OF INSURANCE

CAUSE NUMBER: 14321-AG15-0629-187

IN THE MATTER OF:)
)
Robert Relief,)
Respondent)
)
29193 Northwestern Hwy)
Southfield, MI 48034)
)
Type of Agency Action: Enforcement)
)
)
Indiana Insurance License No. 851927)

FILED
JUL 02 2015
STATE OF INDIANA
DEPT. OF INSURANCE

ADMINISTRATIVE ORDER
NOTICE OF NONRENEWAL OF LICENSE

The Indiana Department of Insurance, pursuant to Indiana Code § 4-21.5-1 *et seq.*, and Indiana Code § 27-1-15.6-12, hereby gives notice to Robert Relief, (“Respondent”) of the following Administrative Order:

1. Respondent, a nonresident of Indiana, is a licensed insurance producer, holding license number 851927 since November of 2012 (“Respondent’s license”).
2. Respondent’s license expired on June 30, 2015.
3. On or about June 29, 2015 the Enforcement Division was notified by Respondent that in 1994 he had been convicted of two (2) federal felonies: possession with intent to distribute and conspiracy to possess with intent to distribute cocaine and heroin.
4. Respondent did not disclose his convictions on his November 05, 2012 application for licensure.

5. Pursuant to Indiana Code § 27-1-15.6-12(b)(1), the commissioner may refuse to renew a producer's license for providing incorrect, misleading, incomplete, or materially untrue information in a license application.

6. Pursuant to Indiana Code § 27-1-15.6-12(b)(6) the commissioner may refuse to renew a producer's license for having been convicted of a felony.

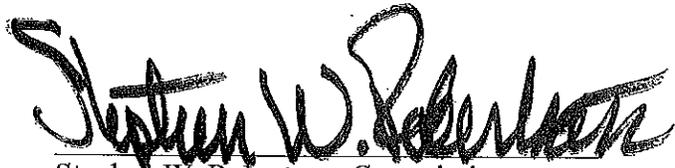
7. Indiana Code § 27-1-15.6-12(d) requires the Commissioner to notify a licensee of the reason for the nonrenewal of his license. This Order serves as that notice.

8. The Commissioner further notifies Respondent that, pursuant to Indiana Code § 27-1-15.6-12(d), Respondent may, within sixty three (63) days of receiving this Order, make a written demand upon the Commissioner for a hearing to determine the reasonableness of this action. Such a hearing shall be held within thirty (30) days from the date of receipt of Respondent's written demand.

WHEREFORE, based on the foregoing, the Commissioner of Insurance hereby notifies Respondent that **his license shall not be renewed.**

7-2-15

Date Signed



Stephen W. Robertson, Commissioner
Indiana Department of Insurance

Certified Mail Receipt: 91 7190 0005 2720 0046 0339