

STATE OF INDIANA)
) SS:
COUNTY OF MARION)

BEFORE THE INDIANA
COMMISSIONER OF INSURANCE

CAUSE NUMBER: 8275-AG09-0601-114

Justin Bauer)
Respondent)
)
2357 Valletta Lane)
Louisville, KY 40205)
)
License Number: 488867)
)
Type of Action: Enforcement)

FILED

JUN 25 2009

STATE OF INDIANA
DEPT. OF INSURANCE

FINAL ORDER AND APPROVAL

The Indiana Department of Insurance (“Department”) and Justin A. Bauer, (“Respondent”), signed an Agreed Entry which purports to resolve all issues involved in the action by the Department regarding Respondent’s license, and which has been submitted to the Commissioner of Insurance (the “Commissioner”) for approval.

The Commissioner, after reviewing the Agreed Entry, finds it has been entered into fairly and without fraud, duress or undue influence, and is fair and equitable between the parties. The Commissioner hereby incorporates the Agreed Entry as if fully set forth herein, and approves and adopts in full the Agreed Entry as attached as Exhibit A as a resolution of this matter.

IT IS THEREFORE ORDERED, ADJUDGED AND DECREED by the Commissioner of Insurance:

1. Respondent violated Indiana Code § 27-1-15.6-12(b)(8).
2. Respondent’s Indiana non-resident Producer License is permanently revoked.

ALL OF WHICH IS ORDERED this 25th day of June 2009.



Carol Cutter, Commissioner
Indiana Department of Insurance

Distribution:

Nikolas P. Mann
INDIANA DEPARTMENT OF INSURANCE
311 West Washington Street, Suite 300
Indianapolis, Indiana 46204-2787

Justin Bauer
2357 Valletta Lane
Louisville, KY 40205

STATE OF INDIANA)
) SS:
COUNTY OF MARION)

BEFORE THE INDIANA
COMMISSIONER OF INSURANCE

CAUSE NUMBER: 8275-AG09-0601-114

IN THE MATTER OF:)

Justin Bauer)
Respondent)

2357 Valletta Lane)
Louisville, KY 40205)

License Number: 488867)

Type of Action: Enforcement)

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JUN 25 2009

STATE OF INDIANA
DEPT. OF INSURANCE

AGREED ENTRY

This Agreed Entry is executed by Nikolas P. Mann, Attorney for and on behalf of the State of Indiana, Department of Insurance ("Department"), and Justin A. Bauer, a licensed Indiana non-resident insurance agent, to resolve all matters relating to the Respondent's Indiana producer license. This Agreed Entry is subject to the review and approval of the Commissioner of the Indiana Department of Insurance.

WHEREAS, Respondent, a resident of Kentucky, is a licensed insurance agent in the State of Indiana, operating under License Number 488867, and


WHEREAS, the parties conversed prior to an administrative hearing for the purpose of negotiating a settlement of the issues relating to the Respondent's Indiana producer license; and

WHEREAS, the Department and Respondent desire to resolve their differences and settle the issues without a hearing;

IT IS THEREFORE NOW AGREED by and between the parties as follows:

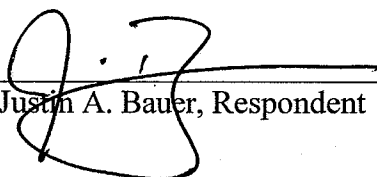
1. The Commissioner has jurisdiction over the subject matter of and the parties to this Agreed Entry.
2. This Agreed Entry is executed voluntarily by the parties.
3. Respondent voluntarily and freely waives his right to a public hearing on the issues relating to his producer license.
4. Respondent voluntarily and freely waives his right to petition for judicial review of this agreement and the Commissioner's Final Order.
5. Respondent submitted false applications for insurance in violation of Indiana Code §27-1-15.6-12(b)(8).
6. Respondent failed to report a change of address to the Department in a timely manner in violation of Indiana Code §27-1-15.6-12(b)(17).
7. Respondent agrees to the permanent revocation of his Indiana producer license.
8. The Department agrees to accept Respondent's compliance with the terms of this agreement as full resolution of the issues relating to his producer license.
9. Respondent has carefully read and examined this agreement and fully understands its terms.

6/22/09
Date Signed



Nikolas P. Mann, Attorney
Indiana Department of Insurance

6-17-09
Date Signed



Justin A. Bauer, Respondent

STATE OF KENTUCKY)
) SS:
COUNTY OF Jefferson)

Before me a Notary Public for Jefferson County, State of Kentucky,
personally appeared Justin A. Bauer and being first duly sworn by me
upon his/her oath, says that the facts alleged in the foregoing instrument is true.

Signed and sealed this 17th day of June, 2009.

Elizabeth F. McGrath
Signature

Elizabeth F. McGrath
Printed

My Commission expires: _____
County of Residence: Jefferson

