

STATE OF INDIANA)
) SS:
COUNTY OF MARION)

BEFORE THE INDIANA
COMMISSIONER OF INSURANCE

CAUSE NO. 16205-AG17-0509-097

IN THE MATTER OF:)
)
William Mecklenburg)
1851 E 1st St STE 600)
Santa Ana, CA 92705-4049)
)
Respondent.)
)
Type of Agency Action: Enforcement)
)
Indiana Insurance License No.: 3168184)

FILED

AUG 24 2017

STATE OF INDIANA
DEPT. OF INSURANCE

FINAL ORDER

The Indiana Department of Insurance (“Department”), by its counsel, Claire Szpara, and William Mecklenburg (“Respondent”), a non-resident surplus lines producer licensed to do business in Indiana, signed an Agreed Entry which purports to resolve all issues involved in the action by the Department and which has been submitted to the Commissioner of Insurance (“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 a resolution of this matter.

IT IS THEREFORE ORDERED by the Commissioner:

1. Respondent shall pay an administrative penalty in the amount of two hundred fifty (\$250) dollars to the Department. This amount is due in full to the Department within thirty (30) days after the signing of this Final Order.

2. Respondent's non-resident surplus lines license suspension shall be lifted after the administrative penalty is received.

ALL OF WHICH IS ORDERED this 24 day of August, 2017.



Stephen W. Robertson, Commissioner
Indiana Department of Insurance

Distribution:

William Mecklenburg
1851 E 1st St STE 600
Santa Ana, CA 92705-4049

Claire Szpara, Counsel
Indiana Department of Insurance
311 W. Washington St., Suite 103
Indianapolis, IN 46204

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Respondent)

License Number: 3168184)

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STATE OF INDIANA
DEPT. OF INSURANCE

AGREED ENTRY

This Agreed Entry is executed by the Indiana Department of Insurance (“Department”), by counsel, Claire Szpara, and William Mecklenburg (“Respondent”), a non-resident surplus lines producer licensed to do business in Indiana, to resolve all issues in the above captioned matter. This Agreed Entry is subject to the review and approval of Stephen W. Robertson, Commissioner, Indiana Department of Insurance (“Commissioner”).

WHEREAS, Respondent is a non-resident surplus lines producer holding license number 3168184;

WHEREAS, Indiana Code § 27-1-15.8-4(a) requires a surplus lines producer, on or before February 1 and August 1 of each year, to collect from the insured and remit to the Department an amount equal to two and one-half percent (2 1/2%) of “all gross premiums upon all policies and contracts procured by the surplus lines producer under the provisions

of this section during the preceding six (6) month period ending December 31 and June 30.”;

WHEREAS, Indiana Code § 27-1-15.6-12(g) states that a licensed producer must furnish the commissioner with a full and complete report listing each insurer with which the licensee has held an appointment during the year preceding within ten (10) days of a request;

WHEREAS, Respondent has failed to provide the semi-annual report and a list of appointments within ten (10) days as requested by the Commissioner; and

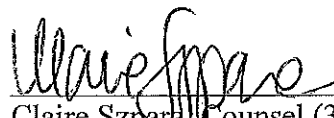
WHEREAS, the Department and Respondent (collectively, “the Parties”) desire to resolve their differences and settle their issues without incurring the time and expense of a hearing.

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

1. The Commissioner has jurisdiction over the subject matter and the Parties in this Agreed Entry.
2. This Agreed Entry is executed voluntarily by the Parties.
3. Respondent voluntarily and freely waives the right to a public hearing in this matter.
4. Respondent voluntarily and freely waives the right to judicial review of this matter.
5. Respondent agrees to pay an administrative penalty in the amount of two hundred fifty dollars (\$250) to the Department within thirty (30) days of the Commissioner’s Final Order adopting this Agreed Entry.

6. After Department receives Respondent's payment of two hundred fifty dollars (\$250), the Department will file a motion to lift the suspension on Respondent's surplus lines license.
7. The Department agrees to accept Respondent's compliance with the Agreed Entry herein as full satisfaction of this matter.
8. Respondent has carefully read and examined this Agreed Entry and fully understands its terms.
9. Respondent has entered into this Agreed Entry freely, and has not been subject to duress, threat or undue influence.
10. Should this Agreed Entry not be accepted by the Commissioner, it is agreed that presentation to and consideration of this Agreed Entry by the Commissioner shall not unfairly or illegally prejudice the Commissioner from further participation in or resolution of these proceedings.
11. Respondent is aware that failure to comply with any term of this agreement will result in the matter being set for hearing.

8-15-17
Date Signed



Claire Szpara, Counsel (34219-64)
Indiana Department of Insurance

8/10/17
Date Signed



William Mecklenburg

CALIFORNIA JURAT WITH AFFIANT STATEMENT

GOVERNMENT CODE § 8202

- See Attached Document (Notary to cross out lines 1-6 below)
- See Statement Below (Lines 1-6 to be completed only by document signer[s], *not* Notary)

1 _____

2 _____

3 _____

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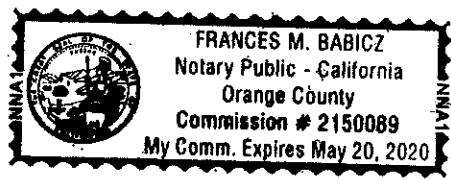
6 _____

Signature of Document Signer No. 1 *Signature of Document Signer No. 2 (if any)*

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California
 County of Orange

Subscribed and sworn to (or affirmed) before me
 on this 10 day of August, 2017,
 by Date Month Year
 (1) William Mecklenburger
 (and (2) _____),
Name(s) of Signer(s)



proved to me on the basis of satisfactory evidence
 to be the person(s) who appeared before me.
 Signature Frances M Babicz
Signature of Notary Public

Seal
 Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document
 Title or Type of Document: IN Agreed Entry Document Date: _____
 Number of Pages: _____ Signer(s) Other Than Named Above: _____

STATE OF INDIANA)
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COUNTY OF MARION)

BEFORE THE INDIANA
COMMISSIONER OF INSURANCE

CAUSE NO.: 16205-AG17-0509-097

IN THE MATTER OF:)

William Mecklenburg)
1851 E 1st St STE 600)
Santa Ana, CA 92705-4049)

Respondent)

License Number: 3168184)

FILED

MAY 12 2017

STATE OF INDIANA
DEPT. OF INSURANCE

FINDINGS OF FACT AND SUSPENSION ORDER

WHEREAS, William Mecklenburg (“Respondent”) is a nonresident insurance producer under license # 3168184;

WHEREAS, Indiana Code § 27-1-15.8-4(a) requires a surplus lines producer, on or before February 1 and August 1 of each year, to collect from the insured and remit to the Department an amount equal to two and one-half percent (2 1/2%) of “all gross premiums upon all policies and contracts procured by the surplus lines producer under the provisions of this section during the preceding six (6) month period ending December 31 and June 30;”

WHEREAS, Indiana Code § 27-1-15.6-12(g) states that a licensed producer must furnish the commissioner with a full and complete report listing each insurer with which the licensee has held an appointment during the year preceding within ten (10) days of a request;

WHEREAS, on April 17, 2017, the Commissioner of the Indiana Department of Insurance (“Commissioner”) mailed Respondent a certified letter requesting the semi-annual report and list of appointments;

WHEREAS, on April 24, 2017, the certified mail receipt for article # 7016 2140 0000 9009 3136, was delivered to individual;

WHEREAS, Respondent has failed to provide the semi-annual report and a list of appointments within ten (10) days as requested by the Commissioner;

WHEREAS, Respondent’s failure to provide the list of appointments within ten (10) days constitutes a violation of Indiana Code § 27-1-15.6-12(g);

WHEREAS, Indiana Code § 27-1-15.6-12(h) provides that the Commissioner may, without a hearing and in his sole discretion, issue an order to suspend any insurance license held by the licensee in the event that the licensee fails to remit the list of appointments within ten (10) days; and

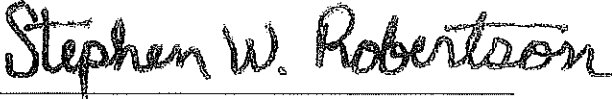
WHEREAS, pursuant to Indiana Code § 4-21.5-4-4, the Commissioner shall set this matter for hearing on this Order upon a request by Respondent.

IT IS THEREFORE ORDERED BY THE COMMISSIONER that Respondent’s license number 3168184 is hereby suspended, effective immediately, and will remain suspended until Respondent:

1. Submits the semi-annual report and remits the surplus lines tax owed, and pays the late penalty as set out in Indiana Code § 27-1-15.8-4(h),
2. Submits the list of appointments requested by the Commissioner, and

3. Reaches a Consent Order with the Department for its expenses in obtaining compliance with this matter or schedules a hearing to determine the same.

ALL OF WHICH IS ORDERED the 12 day of MAY, 2017.



Stephen W. Robertson, Commissioner
Indiana Department of Insurance

Copies to:

William Mecklenburg
1851 E 1st St STE 600
Santa Ana, CA 92705-4049

Claire Szpara, Attorney
Indiana Department of Insurance
311 West Washington St. #103
Indianapolis, IN 46204