

STATE OF INDIANA)
) SS:
COUNTY OF MARION)

BEFORE THE INDIANA
COMMISSIONER OF INSURANCE

CAUSE NUMBER: 16192-AG17-0727-149

IN THE MATTER OF:)
)
Charles Parrott)
56443 Elm Road)
Mishawaka, IN)
)
License Number: 1780050)
)
Respondent)
)
Type of Agency Action: Enforcement)

FILED

OCT 20 2017

STATE OF INDIANA
DEPT. OF INSURANCE

FINAL ORDER

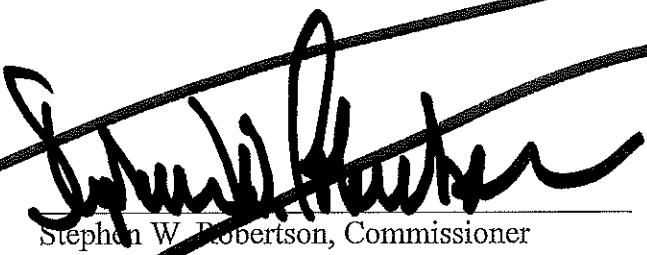
The Indiana Department of Insurance (“Department”), by its counsel, Cathleen Nine-Altevogt, and Charles Parrott (“Respondent”), a resident insurance producer licensed to do business in Indiana, signed an Agreed Entry which purports to resolve all issues involved in the action by the Department regarding Respondent’s license, and which has been submitted to the Commissioner of Insurance (“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 of Insurance:

1. Respondent shall pay an administrative penalty in the amount of one thousand dollars (\$1000), due within thirty (30) days after the signing of this Final Order for violation of Indiana Code § 27-1-15.6-12(b)(8), due to his alleged failure to provide requested insurance for his clients on a timely basis.
2. Respondent's Indiana insurance producer license, number 1780050, shall be placed on probationary status for six months, effective on the date of the Commissioner's Final Order in this matter.
3. Respondent shall submit to the Department an action plan describing changes in his business practices to facilitate accurate and timely updating of coverage, due within thirty (30) days after the signing of this Final Order.

ALL OF WHICH IS ORDERED this 20th day of October, 2017.



Stephen W. Robertson, Commissioner
Indiana Department of Insurance

Distribution:

Cathleen Nine-Altevogt
INDIANA DEPARTMENT OF INSURANCE
311 West Washington Street, Suite 103
Indianapolis, Indiana 46204-2787

Charles Parrott
56443 Elm Road
Mishawaka, IN

STATE OF INDIANA)
) SS:
COUNTY OF MARION)

BEFORE THE INDIANA
COMMISSIONER OF INSURANCE
CAUSE NUMBER: 16192-AG17-0727-149

IN THE MATTER OF:)
)
Charles Parrott)
56443 Elm Road)
Mishawaka, IN)
)
License Number: 1780050)
)
Respondent)
)
Type of Agency Action: Enforcement)

FILED

OCT 20 2017

STATE OF INDIANA
DEPT. OF INSURANCE

AGREED ENTRY

This Agreed Entry is executed by and between the Enforcement Division of the Indiana Department of Insurance (“Department”), by counsel, Cathleen Nine-Altevogt, and Charles Parrott (“Respondent”), a resident insurance 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 for the Indiana Department of Insurance (“Commissioner”).

WHEREAS, Respondent is a licensed Indiana resident insurance producer, holding license number 1780050;

WHEREAS, the Department received a complaint from clients of the Respondent stating that their house was a total loss in a fire and, as a result the Respondent changed their homeowners policy to a course of construction policy as the clients rebuilt the house, but the Respondent did not have the coverage dates of the old and new policy abut, causing a five day gap in coverage.

WHEREAS, the client's homeowners policy also had liability coverage for undeveloped land the clients own in Michigan, which the Respondent failed to cover under the course of construction policy until months after the effective date, and then only when pointed out by the clients.

WHEREAS, there were no losses related to any gaps in coverage.

WHEREAS, Indiana Code § 27-1-15.6-12(b)(8) states the Commissioner may levy a civil penalty, place an insurance producer on probation or take any combination of these actions, against a producer for using fraudulent, coercive, or dishonest practices, or demonstrating incompetence, untrustworthiness, or financial irresponsibility in the conduct of business in Indiana or elsewhere;

WHEREAS, Respondent's omissions in failing to provide coverage for the complaints in an accurate and timely manner is in violation of Indiana Code § 27-1-15.6-12(b)(8); and

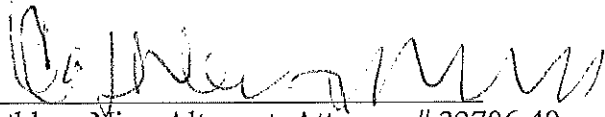
WHEREAS, the Department and Respondent (collectively, the "Parties") desire to resolve their differences and settle the issues without the necessity of an administrative hearing.

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 his right to a public hearing on this matter.
4. Respondent voluntarily and freely waives his right to judicial review of this matter.
5. Respondent agrees to pay an administrative penalty in the amount of one thousand dollars

- (\$1,000) to the Department within thirty (30) days of the Commissioner's Final Order adopting this Agreed Entry.
6. Respondent's Indiana insurance producer license, number 1780050, shall be on probationary status for six months, , effective on the date of the Commissioner's Final Order in this matter.
 7. Within thirty (30) days of the Commissioner's Final Order, Respondent will submit to the Department an action plan describing changes in his business practices to facilitate accurate and timely updating of coverage.
 8. The Department agrees to accept Respondent's compliance with the terms of this Agreed Entry herein as full satisfaction of this matter.
 9. Respondent has carefully read and examined this Agreed Entry and fully understands its terms.
 10. Respondent has entered into this Agreed Entry freely, and has not been subject to duress, threat or undue influence.
 11. 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.
 12. Respondent is aware that failure to comply with any term of this agreement will result in the matter being set for hearing.

9-25-17
Date Signed


Cathleen Nine-Altevogt, Attorney # 32706-49
Indiana Department of Insurance

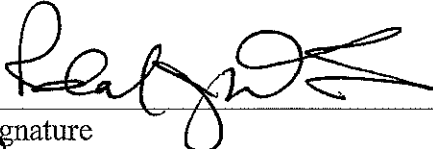
9-25-17
Date Signed

Charles A. Parrott
Charles Parrott, Respondent

STATE OF INDIANA)
COUNTY OF ST JOSEPH) SS:

Before me a Notary Public for ST JOSEPH County, State of Indiana, personally appeared Charles Parrott being first duly sworn by me upon his oath, says that the facts alleged in the foregoing instrument are true.

Signed and sealed this 25 day of SEPTEMBER, 2017.


Signature
RANDAL J. WANBAUGH
Printed

My Commission expires: 9-28-2022
County of Residence: ST JOSEPH

Return executed originals to:
INDIANA DEPARTMENT OF INSURANCE
Enforcement Division, Suite 103
311 West Washington Street
Indianapolis, IN 46204-2787
317/233-4243 - telephone
317/232-5251 - facsimile

unfairly or illegally prejudice the Commissioner from further participation in or resolution of these proceedings.

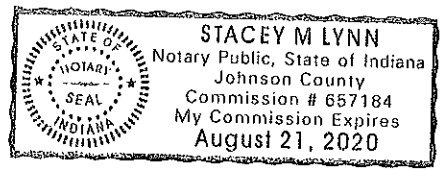
10. Respondent is aware that failure to comply with any term of this agreement will result in the matter being set for hearing.

10/12/17
Date Signed

10-3-2017
Date Signed

Cathleen Nine-Altevogt
Cathleen Nine-Altevogt, Counsel (#32706-49)
Indiana Department of Insurance

Dannella K. Nelson
Dannella K. Nelson Respondent



STATE OF INDIANA)
) SS:
COUNTY OF Johnson)

Before me a Notary Public for Johnson County, State of Indiana, personally appeared Dannella K. Nelson being first duly sworn by me upon his oath, says that the facts alleged in the foregoing instrument are true.

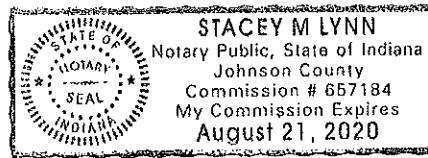
Signed and sealed this 3 day of October, 2017.

Stacey M Lynn
Signature

Stacey M Lynn
Printed

My Commission expires: 08/21/2020

County of Residence: Johnson



Return executed originals to:
INDIANA DEPARTMENT OF INSURANCE
Enforcement Division, Suite 103
311 West Washington Street
Indianapolis, IN 46204-2787
317/233-4243 - telephone
317/232-5251 - facsimile