

Utah Insurance Department
State Office Building, Rm 3110
Salt Lake City, UT 84114
Telephone (801)538-3800
Suzette Green-Wright, Market Conduct Director
Telephone (801) 538-9674

**BEFORE THE INSURANCE COMMISSIONER
STATE OF UTAH**

**UTAH INSURANCE DEPARTMENT,
COMPLAINANT**

vs.

**Individual, License No.1548334,
James Benjamin Harte
2443 Kingscliff Drive NE
Atlanta, Georgia 30345
RESPONDENT**

**NOTICE OF INFORMAL
AGENCY ACTION
AND ORDER**

Docket No. 2014- 111 LC
Enf. Case No. 3544
Judge Mark Kleinfeld
Administrative Law Judge

The Utah Insurance Department has commenced this informal adjudicative proceeding pursuant to Utah Code Ann. § 31A-2-201, 31A-3-103 and 63G-4-201 and Utah Admin. Code R590-102. Based upon information contained in agency files or known to the Department, the Department asserts the following facts:

FACTS

1. Respondent is a licensed insurance producer authorized to do the business of insurance in the State of Utah holding License Number 1548334.
2. Respondent paid his licensing fee by credit card on October 24, 2013, and later refuted the charge.
3. On October 21, 2014, NIPR, the licensing entity for multiple states, requested that the you were contacted on two separate occasions in an attempt to collect this fee. Attempts were

Utah Insurance Department intervene for the outstanding payment of \$81.18. NIPR stated that sent to your email, James_Harte@gbtpa.com, on record and to 2443 Kingscliff Drive NE, Atlanta, Georgia 30345.

BASED UPON THE FOREGOING FACTS

1. In failing to submit the replacement fees for licensure, the Respondent has violated Utah Code § 31A-2-202(4) and 31A-3-103.

Based upon the foregoing facts, the Commissioner now enters the following Order:

ORDER

IT IS HEREBY ORDERED:

1. Respondent's is assessed an administrative forfeiture in the amount of \$500.00 and Respondent must pay the outstanding fee amount of \$81.18 to NIPR, 100 Walnut Street, Suite 1500, Kansas City, MO 64106. Said forfeiture and fee shall be paid no later than ten (10) days after the date this Order becomes final.
2. Respondent shall provide a substantive response to the Commissioner's inquiries regarding the lack of payment of fees.
3. This Order shall become final fifteen (15) days after the date of mailing unless a written request for a hearing is received from the Respondent in the offices of the Department prior to that date. A written request for a hearing shall be signed by the person making the request and shall state the basis for the relief requested.

NOTIFICATION

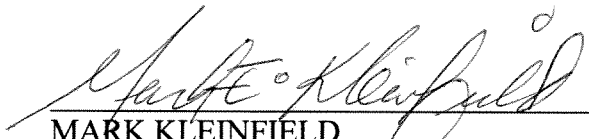
If you request a hearing regarding this matter, please contact Suzette Green-Wright, at 801-538-9674. Failure to request a hearing will be considered a failure to exhaust administrative remedies and will preclude any further administrative or judicial review or appeal of this matter.

You are further notified that a failure to obey an Order of the commissioner may subject you to further penalties, including forfeitures of up to \$2,500.00 per violation and the suspension or revocation of your license and the filing of an action to enforce this Order in District Court, which may impose forfeitures of up to \$10,000.00 per day for continued violation.

You are further notified that other jurisdictions in which you may be licensed may require that you report this action to them.

DATED THIS 21 day of October, 2014.

TODD E. KISER
INSURANCE COMMISSIONER

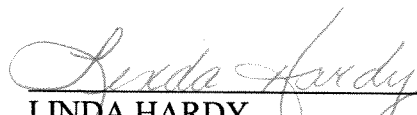

MARK KLEINFELD
Administrative Law Judge
Utah Insurance Department
State Office Building, Room 3110
Salt Lake City, Utah 84114
Telephone (801) 538-3800

CERTIFICATE OF MAILING

The undersigned certifies on this date, a true and correct copy of the forgoing NOTICE OF INFORMAL AGENCY ACTION AND ORDER was mailed, postage prepaid, to the following:

James Benjamin Harte
2443 Kingscliff Drive NE
Atlanta, GA 30345

DATED this 23Rd October, 2014



LINDA HARDY
UTAH INSURANCE DEPARTMENT
STATE OFFICE BUILDING, ROOM 3110
SALT LAKE CITY, UT 84114-6901



State of Utah

GARY R. HERBERT
Governor

SPENCER J. COX
Lieutenant Governor

Insurance Department

UTAH Invoice - Original

JAMES BENJAMIN HARTE
HARTE, JAMES BENJAMIN
2443 KINGSCLIFF DR NE
ATLANTA GA 30345-2140

Printed Date: October 21, 2014
Invoice Date: October 21, 2014
Balance Due: \$500.00
Due Date: November 25, 2014
Invoice ID: 727545
Payor ID: 1548334

Date	Item Description	Amount	
10-21-2014	Monetary Penalty Individual	\$500.00	E-Case 3544 Docket # 2014-111 LC

No Adjustments

No Payments

Balance Amount Due \$500.00

UTAH Invoice - Original

Make check payable to: Utah Insurance Department
Send payment to:
Utah Insurance Department
3110 State Office Building
Salt Lake City, UT 84114-6901

Invoice Date: October 21, 2014
Balance Due: \$500.00
Due Date: November 25, 2014
Invoice ID: 727545
Payor ID: 1548334

E-Case 3544 Docket # 2014-111 LC

**Detach and Return this Voucher with Payment
Payments Will Not Be Processed without Voucher**