

NOV 26 2018

DEPT OF INSURANCE
BY MEK

STATE OF ARIZONA
DEPARTMENT OF INSURANCE

In the Matter of:

LOFTON, JORDIN
(National Producer # 18531184),

Respondent.

No. 18A-067-INS

DEFAULT ORDER

On October 18, 2018, the Arizona Department of Insurance ("Department") issued a Notice of Hearing ("Notice") in the above-captioned matter, a copy of which is attached as **Exhibit A** and incorporated by this reference. The Notice required Jordin Lofton ("Lofton" or "Respondent") to provide a written answer to the allegations set forth in the Notice within twenty days of the issuance of the Notice. As of this date, Respondent has failed to file an answer. On November 13, 2018, counsel for the Department filed a Motion for Default, a copy of which is attached as **Exhibit B**. As of this date, Respondent has not responded to the Department's request. Pursuant to A.A.C.R20-6-106(D), a party that fails to file an answer within the time provided shall be deemed to be in default and one or more of the allegations in the Notice of Hearing may be deemed to be admitted.

FINDINGS OF FACT

1. Notice was proper.
2. Respondent is in default.
3. The allegations in the Notice are deemed admitted.

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CONCLUSIONS OF LAW

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2 1. The conduct alleged in the Notice constitutes grounds for the Director to
3 suspend, revoke or refuse to renew Respondent's license to transact insurance in Arizona,
4 pursuant to A.R.S. §20-295(A).

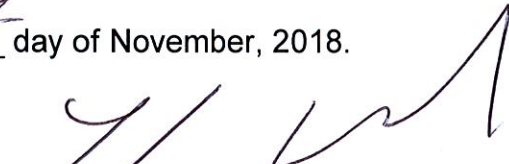
5 **ORDER**

6 IT IS ORDERED:

7 1. The insurance license held by Respondent is revoked effective upon the
8 issuance of this Order.

9 2. The hearing set for **December 6, 2018 at 1:00 p.m.** shall be vacated.

10 DATED this 26th day of November, 2018.

11
12 
13 _____
14 Keith A. Schraad, Interim Director
15 Arizona Department of Insurance

16 **COPY** of the foregoing electronically filed this
17 27th day of November, 2018 to:

18 Kay Abramsohn, Administrative Law Judge
19 Office of Administrative Hearings

20 **COPY** of the foregoing delivered same date to:

21 Mary Kosinski, Regulatory Legal Affairs Officer
22 Steven Fromholtz, Assistant Director, Consumer Protection Division
23 Aqueelah Currie, Licensing Manager
24 Arizona Department of Insurance
25 2910 North 44th Street, Suite 210
26 Phoenix, Arizona 85018

COPY of the foregoing emailed same date to:

Deian Ousounov
Deian.Ousounov@azag.gov
Attorney for the Arizona Department of Insurance

1 **COPY** mailed and e-mailed same date to:

2 Jordin Lofton
3 16404 N. Black Canyon Hwy
4 Phoenix, AZ 85053
5 Respondent

6 Jordin Lofton
7 18350 N. 32nd St.
8 Phoenix, AZ 85032
9 Respondent

10 Jordin Lofton
11 Christinegemell2@teletech.com
12 Respondent

13 *Francine Martinez*
14 _____
15 Francine Martinez
16 7460638

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STATE OF ARIZONA
DEPARTMENT OF INSURANCE

In the Matter of:

Lofton, Jordin
(National Producer Number 18531184)

Docket No. 18A-067-INS

NOTICE OF HEARING

(ALJ Kay Abramsohn)

Respondent.

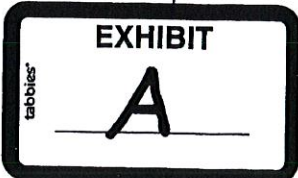
PLEASE TAKE NOTICE that the above-captioned matter will be heard before the Interim Director of Insurance of the State of Arizona (the "Interim Director") or his duly designated representative on **December 6, 2018 at 1:00 p.m., at the Office of Administrative Hearings, 1740 West Adams Street, Lower Level, Phoenix, Arizona 85007¹.**

If you wish to continue this hearing to another date, you must file a motion in writing with the Office of Administrative Hearings not less than **15** days before the scheduled hearing date. Please send it to the attention of the Administrative Law Judge ("ALJ") and include the docket number listed above. You must also mail or hand-deliver a copy of any motion to continue to the Department of Insurance on the same date you file it with the Office of Administrative Hearings.

You are not required to have an attorney represent you. However, if you are represented, your attorney must be licensed to practice law in the State of Arizona. An insurance company may be represented by a corporate officer. A.R.S. § 20-161(B).

You are entitled to be present during the giving of all evidence and you will have a reasonable opportunity to inspect all documentary evidence, examine witnesses, present

¹As authorized under Arizona Revised Statutes ("A.R.S.") §§ 20-161 through and including 20-165 and Title 41, Chapter 6, Article 10 (A.R.S. § 41-1092 *et seq.*).



1 evidence that supports your case and to request that the ALJ issue subpoenas to compel the
2 attendance of witnesses and production of evidence. A.R.S. §20-164(B).

3 A clear and accurate record of the proceedings will be made either by a court reporter
4 or by electronic means. A.R.S. § 41-1092.07(E). If you want a copy of an electronic recording,
5 you must contact the Office of Administrative Hearings at (602) 542-9826. If the hearing was
6 transcribed by a court reporter and you want a copy of the transcript, you must pay the cost of
7 the transcript to the court reporter or other transcriber.

8 Questions concerning issues raised in this Notice of Hearing should be directed to
9 Assistant Attorney General Deian Ousounov, telephone number (602) 542-8011, 2005 N.
10 Central Ave., Phoenix, Arizona 85004, Deian.Ousounov@azag.gov.

11 **NOTICE OF APPLICABLE RULES**

12 On January 23, 1992, we adopted the rules of practice and procedure applicable in
13 contested cases before the Director of Insurance. The hearing will be conducted pursuant to
14 these rules. A.A.C. R20-6-101 through R20-6-115.

15 YOU MUST FILE A WRITTEN RESPONSE (ANSWER) TO THE ALLEGATIONS IN
16 THIS NOTICE WITH US WITHIN **20 DAYS** AFTER WE ISSUE THIS NOTICE. A.A.C.
17 R20-6-106. YOUR RESPONSE SHOULD STATE YOUR POSITION OR DEFENSE AND
18 SHOULD SPECIFICALLY ADMIT OR DENY EACH ASSERTION IN THE NOTICE. IF YOU
19 DO NOT SPECIFICALLY DENY AN ASSERTION, WE WILL CONSIDER IT ADMITTED. ANY
20 DEFENSE YOU DO NOT RAISE WILL BE CONSIDERED WAIVED.

21 IF YOU DO NOT FILE YOUR RESPONSE ON TIME, WE WILL CONSIDER YOU IN
22 DEFAULT AND THE DIRECTOR MAY DEEM THE ALLEGATIONS IN THE NOTICE AS
23 TRUE. ACCORDINGLY, WE WILL TAKE WHATEVER ACTION IS APPROPRIATE
24 INCLUDING SUSPENSION, REVOCATION, IMPOSITION OF A CIVIL PENALTY AND
ORDERING RESTITUTION TO ANY INJURED PERSON.

25 **PERSONS WITH DISABILITIES**

26 PERSONS WITH DISABILITIES MAY REQUEST REASONABLE
27 ACCOMMODATIONS SUCH AS INTERPRETERS, ALTERNATIVE FORMATS, OR

1 ASSISTANCE WITH PHYSICAL ACCESSIBILITY. REQUESTS FOR ACCOMMODATIONS
2 SHOULD BE MADE AS EARLY AS POSSIBLE TO ALLOW TIME TO ARRANGE THE
3 ACCOMMODATIONS. IF YOU REQUIRE ACCOMMODATIONS, PLEASE CONTACT THE
4 OFFICE OF ADMINISTRATIVE HEARINGS AT (602) 542-9826.

5 The allegations supporting this Notice of Hearing are as follows:

6 1. Jordin Lofton ("Respondent") is and was at all material times licensed as a
7 resident insurance producer with a line of authority in accident and health or sickness
8 insurance, National Producer Number 18531184, which expires November 30, 2020.

9 2. Respondent's addresses of record with the Department are: 16404 N. Black
10 Canyon Hwy, Phoenix, AZ 85053 (business) and 18350 N. 32nd St., Phoenix, AZ 85032
11 (mailing). Respondent's e-mail address is: christinegemmel@teletech.com.

12 3. On or about September 7, 2017, the Department issued to Respondent a license
13 as an insurance producer, National Producer Number 18531184.

14 4. On November 6, 2017, the Department notified Respondent by mail at his
15 address of record that his fingerprint card had been processed and returned by the Arizona
16 Department of Public Safety (DPS) as illegible. The Department requested a replacement set
17 of fingerprints along with a completed "Illegible Fingerprint Replacement Form" on or before
18 November 30, 2017. Respondent did not reply to the Department's request.

19 5. On March 2, 2018, the Department notified Respondent a second time by mail at
20 his address of record that his fingerprints had been returned by DPS as illegible and that the
21 Department was about to initiate an administrative action against his license for failure to
22 comply with the fingerprint requirement. The Department requested a response by March 30,
23 2018.

24 6. To date, Respondent has not submitted a full set of fingerprints to the
Department.

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VIOLATIONS

7. Respondent's conduct as described above constitutes the violation of the requirement that an applicant submit a full set of fingerprints to the Department within the meaning of A.R.S. § 20-285(E)(2).

8. Respondent's conduct as described above constitutes providing incomplete information in the license application within the meaning of A.R.S. § 20-295(A)(1).

9. Respondent's conduct as described above constitutes the violation of any provision of A.R.S. Title 20 or any rule, subpoena or order of the director within the meaning of A.R.S. § 20-295(A)(2).

10. Grounds exist for the Interim Director to suspend, revoke, or refuse to renew Respondent's insurance license, impose a civil penalty and/or order restitution pursuant to A.R.S. §§ 20-295(A) and (F).

WHEREFORE, if after hearing, the Interim Director finds the grounds alleged above, the Interim Director may deny, suspend, or revoke Respondent's insurance producer's license and impose a civil penalty. A.R.S. §§ 20-295(A) and (F).

The Interim Director delegates the authority vested in him to the Director of the Office of Administrative Hearings or his designee to preside over the hearing of this matter as the Administrative Law Judge, to make written recommendations to the Interim Director consisting of proposed findings of fact, proposed conclusions of law, and a proposed order. This delegation does not include delegation of the authority of the Director to make an order on the hearing or any other final decision in this matter. A.R.S. § 20-150.

Pursuant to A.R.S. § 41-1092.01, your hearing will be conducted through the Office of Administrative Hearings, an independent agency. Further hearing information may be found at the Office of Administrative Hearings website: www.azoah.com.

DATED this 11th day of October, 2018.


Mary Kosinski, Regulatory Legal Affairs Officer
Arizona Department of Insurance

1 **E-FILE** of the foregoing delivered electronically
this 18th day of October, 2018, to:

2 ALJ Kay Abramsohn
3 oahnoticesofhearing@azoah.com
Office of Administrative Hearings

4 **COPY** of the foregoing delivered this
5 18th day of October, 2018 to:

6 Mary Kosinski, Regulatory Legal Affairs Officer
Steven Fromholtz, Asst. Director, Consumer Protection Division
7 Aqueelah Currie, Licensing Manager
Arizona Department of Insurance
8 2910 North 44th Street, Suite 210
Phoenix, Arizona 85018

9 **COPY** mailed same date by Regular Mail
10 and Certified Mail, Return Receipt Requested, to:


11 Jordin Lofton
16404 N. Black Canyon Hwy
12 Phoenix, AZ 85053
Respondent

13 Jordin Lofton
14 18350 N. 32nd St.
Phoenix, AZ 85032
15 Respondent

16 **COPY** sent same date via electronic mail to:

17 Jordin Lofton
Christinegemell2@teletech.com
18 Respondent

19 Deian Ousounov
Assistant Attorney General
20 Admin.Law@azag.gov
Attorney for the Department of Insurance

21
22 
Francine Martinez
23 7213034

STATE OF ARIZONA
FILED

NOV 13 2018

DEPT OF INSURANCE
BY MEK

1 MARK BRNOVICH
Attorney General
2 Firm Bar No. 14000
3 Deian Ousounov
State Bar No. 031656
4 Assistant Attorney General
Public Law Section
5 2005 N. Central Ave.
Phoenix, Arizona 85004
6 Telephone: (602) 542-4951
Facsimile: (602) 542-4385
7 E-mail: Deian.Ousounov@azag.gov
8 Attorneys for the Arizona Department of Insurance

9 STATE OF ARIZONA
10 DEPARTMENT OF INSURANCE

11 In the Matter of:

No. 18A-067-INS

12 LOFTON, JORDIN
13 (National Producer Number 18531184)

MOTION FOR DEFAULT

14 Respondent.

15 The Arizona Department of Insurance ("Department"), by and through undersigned
16 counsel, hereby requests that the Findings of Fact and Conclusions of Law set forth in the
17 Notice of Hearing and incorporated herein by reference be entered in this matter, deeming
18 Jordin Lofton ("Lofton" or "Respondent"), in default, deeming the allegations set forth in the
19 Notice as true, and ordering that Respondent's Insurance license be revoked.
20

21 On October 18, 2018, a Notice of Hearing ("Notice") was filed in this matter and
22 served upon Jordin Loftin at his address of record via certified mail pursuant to A.R.S. § 41-
23 1092.04. On October 24, 2018, the Department received the certified mail return receipt,
24 No. 7004 0750 0001 8551 3299, showing that the Notice had been delivered and accepted
25 at Respondent's mailing addresses of record: 18350 N. 32nd St., Phoenix, AZ 85032. A
26

EXHIBIT

B

tabbles

1 copy of the certified mail receipt is attached to this request as **Exhibit A**.

2 Respondent had twenty (20) days from the date of issuance of the Notice to file a
3 written answer to the allegations contained therein pursuant to Arizona Administrative Code
4 ("A.A.C") R20-6-106. As of the date of this Motion, Respondent has not filed an answer nor
5 has he appeared through counsel. Rule 20-6-106(D) of the Arizona Administrative Code
6 provides that if an answer is not timely filed, the Respondent shall be deemed in default
7 and the Director may deem the allegations set forth in the Notice of Hearing as true and
8 take whatever action is appropriate including revoking the license.

9 The allegations supporting the Notice of Hearing are as follows:

10 1. Jordin Lofton ("Respondent") is and was at all material times licensed as a
11 resident insurance producer with a line of authority in accident and health or sickness
12 insurance, National Producer Number 18531184, which expires November 30, 2020.

13 2. Respondent's addresses of record with the Department are: 16404 N. Black
14 Canyon Hwy, Phoenix, AZ 85053 (business) and 18350 N. 32nd St., Phoenix, AZ 85032
15 (mailing). Respondent's e-mail address is: christinegemmell@teletech.com.

16 3. On or about September 7, 2017, the Department issued to Respondent a
17 license as an insurance producer, National Producer Number 18531184.

18 4. On November 6, 2017, the Department notified Respondent by mail at his
19 address of record that his fingerprint card had been processed and returned by the Arizona
20 Department of Public Safety (DPS) as illegible. The Department requested a replacement
21 set of fingerprints along with a completed "Illegible Fingerprint Replacement Form" on or
22 before November 30, 2017. Respondent did not reply to the Department's request.
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1 5. On March 2, 2018, the Department notified Respondent a second time by
2 mail at his address of record that his fingerprints had been returned by DPS as illegible and
3 that the Department was about to initiate an administrative action against his license for
4 failure to comply with the fingerprint requirement. The Department requested a response
5 by March 30, 2018.

6 6. To date, Respondent has not submitted a full set of fingerprints to the
7 Department.

8 Based upon the foregoing, the Department respectfully requests that the allegations
9 set forth in the October 18, 2018 Notice of Hearing be deemed admitted and that
10 Respondent's insurance license be revoked.

11 RESPECTFULLY SUBMITTED this 13th day of November, 2018.

12 MARK BRNOVICH, Attorney General

13 By /s/ Deian Ousounov
14 Deian Ousounov, Assistant Attorney General
15 Attorneys for the Arizona Department of Insurance

16 COPY of the foregoing electronically filed this
17 13th day of November, 2018 with:

18 Mary Kosinski, Regulatory Legal Affairs Officer
19 Steven Fromholtz, Assistant Director, Consumer Protection Division
20 Aqueelah Currie, Licensing Manager
21 Arizona Department of Insurance
mkosinski@azinsurance.gov
sfromholtz@azinsurance.gov
acurrie@azinsurance.gov

22 COPY mailed and e-mailed same date to:

23 Jordin Lofton
24 16404 N. Black Canyon Hwy
25 Phoenix, AZ 85053
26 Respondent

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Jordin Lofton
18350 N. 32nd St.
Phoenix, AZ 85032
Respondent

Jordin Lofton
Christinegemell2@teletech.com
Respondent

/s/ Teresa C. Carranza
7459095

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mail piece, or on the front if space permits. 	A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <i>[Handwritten Signature]</i>
1. Article Addressed to: <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> <p>Jordin Lofton 18350 N. 32nd St. Phoenix, Arizona 85032</p> </div>	B. Received by (Printed Name) <input type="checkbox"/> Date of Delivery <i>[Handwritten Name]</i>
2. Article Number (Transmittal Service Only)	D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:
PS Form 3811, February 2004	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
7004 0750 0001 8551 3299	

UNITED STATES POSTAL SERVICE
AZ 852
22 OCT '18
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First-Class Mail
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USPS
Permit No. G-10

RECEIVED
OCT 24 2018
ARIZONA DEPARTMENT OF INSURANCE
ADMINISTRATIVE SERVICES

• Sender: Please print your name, address, and ZIP+4 in this box •

Arizona Department of Insurance
100 North 15th Avenue, Suite 102
Phoenix, AZ 85007-2624

07-262427

