

MIKE KREIDLER
STATE INSURANCE COMMISSIONER

STATE OF WASHINGTON

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OFFICE OF
INSURANCE COMMISSIONER
HEARINGS UNIT

2013 APR -2 A 10:57

Fax: (360) 664-2782

Hearings Unit, DIC
Political Division
Kelly A. Cairns
Paralegal
(360) 725-7002
KellyC@oic.wa.gov

Patricia D. Petersen
Chief Presiding Officer
(360) 725-7105

BEFORE THE STATE OF WASHINGTON
OFFICE OF INSURANCE COMMISSIONER

In the Matter of)	Docket No. 13-0043
)	
MARIA DIAZ aka MARIA A. DIAZ aka)	NOTICE OF HEARING
MARIA A. DIAZ-ALVAREZ,)	
)	
Licensee.)	

TO: Maria Diaz aka Maria A. Diaz
aka Maria A. Diaz-Alvarez
2925 SW 332nd Place
Federal Way, WA 98023

Maria Diaz aka Maria A. Diaz
aka Maria A. Diaz-Alvarez
2659 SW 332nd Court
Federal Way, WA 98023

SAV-ON Insurance Agencies
ATTN: Maria Diaz aka Maria A. Diaz aka Maria A. Diaz-Alvarez
22815 Pacific Hwy So.
Des Moines, WA 98198

COPY TO: Mike Kreidler, Insurance Commissioner
Deborah McCurley, Acting Chief Deputy Insurance Commissioner
John F. Hamje, Deputy Commissioner, Consumer Protection Division
Kate Reynolds, Staff Attorney, Legal Affairs Division
Charles Brown, Acting Deputy Commissioner, Legal Affairs Division
Office of the Insurance Commissioner
PO Box 40255
Olympia, WA 98504-0255

Mailing Address: P. O. Box 40255 • Olympia, WA 98504-0255
Street Address: 5000 Capitol Blvd. • Tumwater, WA 98501



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On February 5, 2013, the Insurance Commissioner (OIC) issued an Order Revoking License No. 13-0043, revoking the Washington resident insurance producer's license of Maria Diaz aka Maria A. Diaz aka Maria A. Diaz-Alvarez ("Licensee" or "Ms. Diaz"). The OIC's Order alleges that since the Licensee received her Washington state insurance producer's license in June 2007 she has submitted insurance applications that contained false information, including:

- 1) Between March 2009 and December 2011 Ms. Diaz submitted 37 automobile insurance applications which contained false Washington state addresses. The false home addresses were actually those of Ms. Diaz, a co-worker of Ms. Diaz, their family members, or minor variations of these home addresses.
- 2) Ms. Diaz admitted to an OIC investigator that since approximately 2008 she submitted insurance applications for individuals who were not Washington residents. Ms. Diaz also admitted to falsely using her own home address for these applications.
- 3) Ms. Diaz admitted to an OIC investigator that she submitted insurance applications for individuals using false driver's license numbers.
- 4) The proof of insurance documents which were subsequently issued to individuals using the false information provided by Ms. Diaz were subsequently used to obtain proper Washington State driver's licenses for these individuals.

On February 7, 2013, the Licensee filed a Demand for Hearing to contest the OIC's Order. The Licensee requested a hearing to have an opportunity to explain the circumstances.

On February 19, 2013, the undersigned held a first prehearing conference in this matter, which included all parties. The OIC was represented by Kate Reynolds, Esq., Staff Attorney in the OIC's Legal Affairs Division. The Licensee appeared pro se. The undersigned reviewed procedure to be expected at hearing and answered all questions and concerns of the parties. Of note, the undersigned advised the parties that, pursuant to RCW 48.04.020(1), the OIC's Order Revoking License against the Licensee was automatically stayed prior to its taking effect and will remain stayed until the Final Order after hearing is entered. Finally, the parties agreed that this hearing should be held on April 29, 2013, and continuing on each successive day until terminated.

Accordingly, **YOU ARE HEREBY NOTIFIED that a hearing will be held commencing on Monday, April 29, 2013, at 10:00 a.m. Pacific Standard Time.** The purpose of this hearing, which will include all parties, is to consider whether the Order of Revocation, revoking the insurance producer's license of Maria Diaz, should be upheld, or set aside, or modified in some way such as e.g., imposing a suspension or probation on her insurance producer's license and/or a monetary penalty in lieu of revocation.

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The OIC will appear by and through Kate Reynolds, Staff Attorney in the Legal Affairs Division. Ms. Reynolds' address is Office of the Insurance Commissioner, Legal Affairs Division, P.O. Box 40255, Olympia, WA 98504-0255 and her telephone number is (360) 725-7179. The Licensee will appear pro se, although she is advised that she may retain an attorney to represent her at any time. Licensee's address is 2925 SW 332nd Place, Federal Way, WA 98023 and her telephone number is (253) 202-3247.

Patricia D. Petersen, Esq., who serves as Chief Presiding Officer for the Office of the Insurance Commissioner, has been designated to hear and determine this matter. Her address is Office of Insurance Commissioner, P.O. Box 40255, Olympia, Washington 98504-0255. Her telephone number is (360) 725-7105. All interested individuals and entities who have questions or concerns concerning this proceeding should direct them to her paralegal, Kelly A. Cairns, at the same address. Ms. Cairns' telephone number is (360) 725-7002.

The hearing will be held under the authority granted by the Insurance Commissioner under Chapter 48.04 RCW. The basic facts to be relied upon are those set forth above, which are more specifically included in the OIC's above-referenced Order Revoking License and in Licensee's above-referenced Demand for Hearing.

The hearing will be governed by the Administrative Procedure Act, Chapter 34.05 RCW, and the model rules of procedure contained in Chapter 10-08 WAC. All parties may be represented at the hearing. They may examine witnesses and fully respond and present evidence and argument on all issues involved.

As required by RCW 34.05.434(2)(i), you are advised that a party who fails to attend or participate in any stage of the proceeding may be held in default in accordance with Chapter 34.05 RCW.

Pursuant to WAC 10-08-040(2) and in accordance with ch. 2.42 RCW, if a limited English speaking or hearing impaired or speech impaired party or witness needs an interpreter, a qualified interpreter will be appointed. There will be no cost to the party or witness therefore, except as may be provided by ch. 2.42 RCW. A Request for Interpreter form is attached to the original of this Notice, with instructions thereon.

This Notice is provided pursuant to RCW 48.04.010 and RCW 34.05.434.

Based upon the above activity,

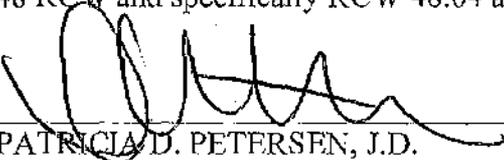
IT IS HEREBY ORDERED that the adjudicative proceeding in this matter shall commence on Monday, April 29, 2013 at 10:00 a.m. Pacific Standard Time, continuing on each successive day until terminated, in the Office of the Insurance Commissioner, 5000 Capitol Blvd., Tumwater, WA.

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ENTERED AT TUMWATER, WASHINGTON, this 1st day of April, 2013, pursuant to Title 48 RCW and specifically RCW 48.04 and Title 34 RCW and regulations applicable thereto.



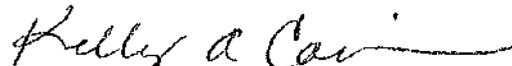
PATRICIA D. PETERSEN, J.D.

Chief Presiding Officer

Declaration of Mailing

I declare under penalty of perjury under the laws of the State of Washington that on the date listed below, I mailed or caused delivery through normal office mailing custom, a true copy of this document to the following people at their addresses listed above: Maria A. Diaz Alvarez, Mike Kreidler, Deborah McCurley, John F. Hamje, Esq., Kate Reynolds, Esq., and Charles Brown, Esq.,

DATED this 2nd day of April, 2013.


KELLY A. CAIRNS

HEARINGS UNIT
Fax: (360) 664-2782

Patricia D. Petersen
Chief Presiding Officer
(360) 725-7105

Hearings Unit
Paralegal
(360) 725-7002
Hearings@oic.wa.gov

To request an interpreter, complete and mail this form to:

Chief Presiding Officer
Office of Insurance Commissioner
P.O. Box 40255
Olympia, WA 98504-0255

REQUEST FOR INTERPRETER

I am a party or witness in Matter No. 13-0043, before the Insurance Commissioner. I NEED AN INTERPRETER and request that one be furnished.

Please check the statements that apply to you:

I am a non-English-speaking person. I cannot readily speak or understand the English language. My primary language is _____ (insert your primary language). I need an interpreter who can translate to and from the primary language and English.

I am unable to readily understand or communicate the spoken English language because:

- I am deaf.
- I have an impairment of hearing.
- I have an impairment of speech.

[Please state below or on the reverse side any details which would assist the Commissioner or Presiding Officer in arranging for a suitable interpreter or in providing appropriate mechanical or electronic amplification, viewing, or communication equipment.]

Date: _____

Signed: _____

Please print or type your name: _____

Address: _____

Telephone: _____