

FILED

BEFORE THE STATE OF WASHINGTON
OFFICE OF INSURANCE COMMISSIONER

2015 MAR -5 P 1:14

In the Matter of)	Docket No. 14-0210
)	
KYLE E. BRADBURY,)	NOTICE OF HEARING
)	
Licensee.)	
_____)	

TO: Kyle E. Bradbury
1415 Reser Road
Walla Walla, WA 99362

Kyle E. Bradbury
105 South 3rd
Walla Walla, WA 99362

COPY TO: Mike Kreidler, Insurance Commissioner
James T. Odiorne, J.D., CPA, Chief Deputy Insurance Commissioner
John F. Hamje, Deputy Commissioner, Consumer Protection Division
Drew Stillman, Insurance Enforcement Specialist, Legal Affairs Division
AnnaLisa Gellermann, Deputy Commissioner, Legal Affairs Division
Office of the Insurance Commissioner
PO Box 40255
Olympia, WA 98504-0255

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

On November 4, 2014, the Office of the Insurance Commissioner (“OIC”) issued an Order Revoking License, No. 14-0210 (“Order Revoking”), effective November 24, 2014, revoking the Washington State insurance producer license of Kyle E. Bradbury.

The Order Revoking was pursuant to RCW 48.17.530 and RCW 48.17.540(2), based, in summary, upon allegations that Mr. Bradbury: 1) accepted premium payments from Whitman Planned Unit Development HOA (“Whitman”) but failed to provide insurance coverage or apply the premium payment to an insurance policy, leaving Whitman uninsured for one year; and 2) failed to timely and fully respond to OIC’s inquiries.

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On February 4, 2015, Mr. Bradbury submitted a Demand for Hearing ("Demand"), which asserted that the OIC's allegations as set forth in the Order Revoking are inaccurate and that revocation of his license is too drastic.

On March 5, 2015, the undersigned held a first prehearing conference. The OIC was represented by Darryl Colman, Attorney at Law, Insurance Enforcement Specialist in the OIC's Legal Affairs Division. Mr. Bradbury appeared pro se. After considering the views of the Parties, I enter the following Order:

The OIC intends to bring a Motion to dismiss the Demand, based on untimeliness. Such Motion shall be served and filed by March 9, 2015 (email acceptable). Mr. Bradbury's written Response to the Motion shall be served and filed by March 10, 2015. The OIC's Reply to the Response shall be served and filed by March 11, 2015. I expect to rule without oral argument as soon as possible after receiving these papers.

Assuming this matter is not dismissed on OIC's Motion, by March 16, 2015, the parties shall serve and file lists of witnesses they expect to call at the evidentiary hearing and state the form of testimony (live appearance, telephonic appearance, declaration/affidavit).

Subject to the ruling on OIC's Motion, **An evidentiary hearing will be held at the Office of the Insurance Commissioner, 5000 Capitol Blvd., Tumwater, WA, beginning on March 23, 2015, at 10:00 AM, Pacific Time.** The hearing is expected to end the morning of March 23, 2015, but will continue until completed. The purpose of the hearing is to consider whether OIC's Order Revoking should be upheld, modified or set aside.

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 and may examine witnesses, respond, and present evidence and argument on all relevant issues.

A party who fails to attend or participate in the hearing or another stage of this proceeding may be held in default in accordance with Chapter 34.05 RCW. *See*, RCW 34.05.434(2)(i).

Judge George Finkle (Ret.), Presiding Officer, has been designated by the Insurance Commissioner to hear and determine this matter. The hearing will be held under the authority granted by the Insurance Commissioner under Chapter 48.04 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, with instructions, is attached to the original of this Notice.

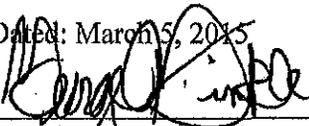
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All case related documents and correspondence shall be directed to the Hearings Unit, Office of Insurance Commissioner, P.O. Box 40255, Olympia, Washington 98504-0255. All interested individuals and entities who have questions or concerns concerning this proceeding should direct them to the Hearings Unit paralegal, Kelly Cairns, at the same address. Ms. Cairns' telephone number is (360) 725-7002.

Dated: March 5, 2015



JUDGE GEORGE FINKLE (Ret.)
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: Kyle E. Bradbury, Mike Kreidler, James T. Odiome, J.D., CPA, John F. Hamje, Drew Stillman, and AnnaLisa Gellermann.

DATED this 5th day of March, 2015.



KELLY A. CAIRNS

OFFICE OF INSURANCE COMMISSIONER
HEARINGS UNIT
Fax: (360) 664-2782

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

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

REQUEST FOR INTERPRETER

I am a party or witness in Matter No. 14-0210 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: _____