

STATE OF OREGON
DEPARTMENT OF CONSUMER AND BUSINESS SERVICES
DIVISION OF FINANCIAL REGULATION

In the Matter of:

Case No. INS-16-0074

MICHAEL GALANTE,

Respondent.

ORDER TO CEASE AND DESIST,
ORDER PROPOSING REVOCATION
OF LICENSE AND CONSENT TO
ENTRY OF ORDER

The Director of the Department of Consumer and Business Services for the State of Oregon (“Director”), acting in accordance with Oregon Revised Statutes (“ORS”) chapters 731, 732, 733, 734, 735, 737, 742, 743, 743A, 744, 746, 748 and 750 (“Insurance Code”), has conducted an investigation into MICHAEL GALANTE (“Respondent”) regarding violations of 744.074(1)(e), which authorizes enforcement action where the insurance producer intentionally misrepresents the terms of an actual or proposed insurance contract or application for insurance.

Respondent wishes to resolve and settle this matter with the Director.

Now, therefore, as evidenced by the signature(s) subscribed on this Order, Respondent hereby CONSENTS to entry of this Order.

FINDINGS OF FACT

The Director FINDS that:

1. Respondent has an Oregon Resident Insurance License (“License”), License No. 7537290, which expires on September 30, 2017.
2. Allstate conducted an investigation which revealed Respondent changed zip codes on insureds’ accounts to provide customers with lower premium rates. Respondent admitted that he changed the zip codes on ten to twelve accounts.

Division of Financial Regulation
Labor and Industries Building
350 Winter Street NE, Suite 410
Salem, OR 97301-3881
Telephone: (503) 378-4387



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CONSENT TO ENTRY OF ORDER

I, Michael Dennis Galante II, state that I have read the foregoing Order and that I know and fully understand the contents hereof; that the factual allegations stated herein are true and correct; that I have been advised of my right to a hearing, and that I have been advised of my right to be represented by counsel in this matter; that I voluntarily consent to the entry of this Order without any force or duress, expressly waiving any right to a hearing in this matter, as well as any rights to administrative or judicial review of this order; that I understand that the Director reserves the right to take further actions against me to enforce this Order or to take appropriate action upon discovery of other violations of the Oregon Insurance Code by me; and that I will fully comply with the terms and conditions stated herein.

I understand that this Order is a public document.

/s/ Michael D. Galante II

Signature

State of Oregon

County of Jackson

Signed or attested before me on this 2 day of March, 2016

by Michael Dennis Galante II

/s/ Kristina Marie Madsen

Notary Public

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