



Extract of OPRA Requestor Information

November 30, 2017

Page: 1 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

Request #	Division	Date/Time	Requestor	Company Name
W125130	PAC	9/26/2017 9:59:01 AM	Michele Cumberland	NJM Insurance Co
Address				
301 Sullivan Way, West Trenton, NJ 08628				
Email Address				
MCumberland@njm.com				
Requested Information				
Hi, I'm requesting the NJ DOBI Homeowners Market Survey in-force Exposures as of 6/30/2017. Thanks! Michele C.				
Request #	Division	Date/Time	Requestor	Company Name
W126678	INS	11/9/2017 9:25:46 AM	Tyler N Hewitt	Discovery Data
Address				
12 Christopher Way, Ste 202, Eatontown, NJ 07724				
Email Address				
thewitt@discoveryco.com				
Requested Information				
Please provide the following information for all Life, Accident and Health or Sickness, Property, Casualty, Viatical/Life Settlement, Personal Lines, Surplus Lines, and Variable insurance agents that are licensed in New Jersey, regardless of their state of residence: Agent First Name; Agent Middle Name; Agent Last Name; Agent Suffix Name; Agent Employer; Business Address (Street1, Street2, City, State, Zip Code); Business Phone Number; Email Address; License Number; License Status (Active Only); License Type; License Effective Date; License Expiration Date; Authorization Lines (As specified above) Please send the requested data to me in Excel format to the email address provided.				
Request #	Division	Date/Time	Requestor	Company Name
C125930	ADM	10/18/2017 11:25:26 AM	Shannon Sizensky	Chase Insurance Agency
Address				
200 White Clay Center Drive, Floor 3, Newark, NJ 19711				
Email Address				
chase.agencylic@jpmchase.com				
Requested Information				
request for branch registrations of chase insurance agency, inc, filed with DOBI				
Request #	Division	Date/Time	Requestor	Company Name
W123471	ADM	8/1/2017 10:02:18 AM	Lauren Vrana	Turke & Strauss LLP
Address				
613 Williamson Street STE 209, Madison, NJ 53703				
Email Address				
laurenv@turkestrauss.com				
Requested Information				



Extract of OPRA Requestor Information

November 30, 2017

Page: 2 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

Dear Public Records Officer: Please produce all consumer complaints regarding PNC Bank, N.A. Relevant complaints are limited to those received on or after August 1, 2013. If possible, please produce the records electronically, via email to laurenv@turkestrauss.com or on a CD. We are willing to pay all reasonable costs associated with the production of records. Should you have any questions, please contact me immediately. Very Truly Yours, Lauren

Request #	Division	Date/Time	Requestor	Company Name
W124345	PAC	8/29/2017 8:43:39 AM	Kurt H Andariese	Plymouth Rock Assurance
Address [REDACTED]				
Email Address kandariese@plymouthrock.com				
Requested Information Three Auto Reports as of June 30, 2017. 1. NJDOBI - Private Passenger Auto Semi-Annual Reports in-Force Exposures - Total Market - Sorted by Territory. 2. NJDOBI- Private Passenger Auto Semi-Annual Reports In- Force Exposures by Group - Total Market. 3. NJDOBI Private Passenger Auto Exposures Report Exposures by Policy class for Group and Company for Current Period. One Homeowner Report as of June 30, 2017. 1. NJDOBI Homeowners market Survey				

Request #	Division	Date/Time	Requestor	Company Name
W124385	CFI	8/30/2017 11:29:46 AM	edward hanratty	tomes & hanratty pc
Address 1 west main st, freehold, NJ 07728-0772				
Email Address thanratty@tomeslawfirm.com				
Requested Information Any and all records relating to surety bonds relating to MLD Mortgage Inc., 30 B Vreeland Road, Florham Park, NJ 07932 covering from 2010 to present				

Request #	Division	Date/Time	Requestor	Company Name
W124699	LAH	9/12/2017 7:52:20 PM	Nicola Iannitelli	
Address 250 pehle Ave, Saddle Brook, NJ 07663				
Email Address niannitelli@ft.newyorklife.com				
Requested Information Please send me a list of all newly licensed Life and Health producers from 7/25 to current with all mail, email and phone number where available. Thanks				

Request #	Division	Date/Time	Requestor	Company Name
W125517	REC	10/5/2017 3:30:38 PM	Noelle Frieson	Alexander Anderson Real Estate Group
Address 14 Bergen Street, Hackensack, NJ 07601-0760				
Email Address nfrieson@alexander-anderson.com				
Requested Information				



Extract of OPRA Requestor Information

November 30, 2017

Page: 3 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

Hi All :)We would like a list of all the real estate agents that have passed their test in the last 3 months in NJ.Thanks so much!

Request #	Division	Date/Time	Requestor	Company Name
W125266	COM	9/28/2017 3:20:11 PM	Vito Gagliardi	Porzio, Bromberg & Newman, PC
Address				
100 Southgate Parkway, Morristown, NJ 07960-0796				
Email Address				
jaciaburri@pbnlaw.com				
Requested Information				
<i>All communications between the Department of Banking and Insurance and White Horse Strategies which mentions Meadowlands Hospital, Dr. Richard Lipsky, Tamara Dunaev, Pavel Pogodin or Anastasia Burlyuk from January 1, 2010 to present.All communications between the Department of Banking and Insurance and TPI Consulting Group which mentions Meadowlands Hospital, Dr. Richard Lipsky, Tamara Dunaev, Pavel Pogodin or Anastasia Burlyuk from January 1, 2010 to present.All communications to/from any of the following e-mail domains which mentions Meadowlands Hospital, Dr. Richard Lipsky, Tamara Dunaev, Pavel Pogodin or Anastasia Burlyuk: "@northjersey.com"; "@healthjournalism.org"; "@nj.com"; "@njbmagazine.com"; "@njcitizenaction.org"; "@cmwf.org"; "@njappleseed.org"; "@njhcqi.org"; "@hpae.org"; "@njleg.org"; "?@politickernj.com?"; "?@nicb.org"; "@njadvancemedia.com"; "@starledger.com"; and "@doh.state.nj.us" from January 1, 2010 to present.All communications involving Yan Moishe or his entity?s acquisition of Meadowlands Hospital announced in late 2016.All communications concerning any and all New Jersey Department of Health inspections at Meadowlands Hospital since December 2010.All communications concerning the December 2010 purchase of Meadowlands Hospital by a consortium including Dr. Richard Lipsky.</i>				

Request #	Division	Date/Time	Requestor	Company Name
C124691	ADM	9/12/2017 2:25:50 PM	Ghina Malaney	Giglione-Ackerman Agency
Address				
, , NJ				
Email Address				
gmalaney@ailnj.com				
Requested Information				
<i>Our agency would like to get a list of all NJ license life insurance agents, mortgage brokers and real estate sales people.</i>				
<i>(Requestor clarified on September 12, 2017, that she is seeking resident life insurance agents, mortgage brokers are individuals, and aware of the fields present in the REC database.)</i>				

Request #	Division	Date/Time	Requestor	Company Name
W125422	REC	10/3/2017 2:18:38 PM	Sarah S Schloss	Real Data Strategies, Inc.
Address				
480, Brea, NJ 92821-9282				
Email Address				
sschloss@realdatastrategies.com				
Requested Information				
<i>I am requesting all available license information for all brokerage firms and all affiliate brokers and salespersons who are licensed in New Jersey. Please also include all Referral Agents.Thank you,Sarah Schloss</i>				

Request #	Division	Date/Time	Requestor	Company Name
W125361	PAC	10/2/2017 1:52:08 PM	Sarah Flanagan	Prizm, LLC
Address				



Extract of OPRA Requestor Information

November 30, 2017

Page: 4 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

1015 Briggs Road, Suite 100, Mount Laurel, NJ 08054

Email Address

sflanagan@prizmlc.com

Requested Information

I would like a copy of the Private Passenger Auto Semi-Annual Report: Personal Injury Protection Medical Expense Limits Report, Limits of Liability Report Exposures by Territory for 6/30/16. I am looking for the industry wide data regarding PIP Policy limits and Health Primary coverage.

Request #	Division	Date/Time	Requestor	Company Name
W125962	LAH	10/19/2017 9:05:45 AM	Douglas Heck	

Address

[REDACTED]

Email Address

[REDACTED]

Requested Information

List of licensed, Life, Health, casualty, property, and Title agents in NEW JERSEY. name, address, phone, email etc all available data

Request #	Division	Date/Time	Requestor	Company Name
W125575	REC	10/6/2017 7:15:13 PM	Elizabeth Barnett	At Your Pace Online

Address

531 Ne F Street, Grants Pass, NJ 97526-9752

Email Address

elizabeth@atyourpaceonline.com

Requested Information

Hello, I'm with At Your Pace Online. We are an approved continuing education provider for Real Estate Mortgage Loan Originators. We would like to request a list of all licensed Mortgage Loan Originators that includes full name, mailing address, license type, license number, date first licensed, license expiration, and email addresses. If there is anything else that I can do to facilitate this request please feel free to let me know. Once the request is complete please email the information to me at elizabeth@atyourpaceonline.com. Thank you, Elizabeth Barnett AYPO, LLC 531 NE F Street Grants Pass, OR 97526(541)237-6054 (Direct)

Request #	Division	Date/Time	Requestor	Company Name
W126514	LAH	11/3/2017 3:20:10 PM	Lauren Tuttle	Unum Group

Address

2211 Congress Street, Mail Stop C473, Portland, NJ 04122

Email Address

LTuttle@unum.com

Requested Information

I am requesting a copy of the First Look Vision Network, LLC Approval for Organized Delivery System (ODS) Certification. I would like a copy of the complete filing including all supporting documents. This ODS application was approved 10-18-17.

Request #	Division	Date/Time	Requestor	Company Name
W124559	LAH	9/6/2017 4:26:35 PM	Lauren Lee	

Address



Extract of OPRA Requestor Information

November 30, 2017

Page: 5 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

700 S Flower Street Suite 2600, Los Angeles, NJ 90017

Email Address

lauren.lee@joany.com

Requested Information

I am looking for the rate filings (effective in 2018) for health insurance companies offering individual health insurance. I am requesting to examine these filings.

Request #	Division	Date/Time	Requestor	Company Name
W126052	REC	10/22/2017 3:11:00 PM	Noelle Frieson	Alexander Anderson Real Estate Group

Address

14 Bergen Street, Hackensack, NJ 07601

Email Address

nfrieson@alexander-anderson.com

Requested Information

Hi I would like a list of all the Licensed Real Estate Education Directors in New Jersey. This is not the instructor list, these are people who are licensed to be real estate school directors. Please provide as much contact information as you are able to provide as per your guidelines. Thanks

Request #	Division	Date/Time	Requestor	Company Name
W124272	CFI	8/25/2017 1:41:51 PM	David Ricci	Law Office of David C. Ricci, LLC

Address

51 JFK Pkwy, First Floor West, Short Hills, NJ 07078

Email Address

dricci@njconsumerlawyer.com

Requested Information

For New Century Financial Services, Inc., please provide copies of the 2014, 2015, and 2016 consumer lender licenses required under the New Jersey Consumer Finance Licensing Act, at N.J.S.A. 17:11C-3.

Request #	Division	Date/Time	Requestor	Company Name
W124524	REC	9/5/2017 8:42:22 PM	Todd Long	

Address

[REDACTED]

Email Address

tdlpropertiesllc@yahoo.com

Requested Information

Requesting any and all paperwork on the property below since being built pertaining to building, fire, electric, plumbing, additions, oil tank removal approvals and permits. Thank youProperty Address:270 Weber AvenueEwing, NJ 08638

Request #	Division	Date/Time	Requestor	Company Name
W123968	LAH	8/17/2017 8:16:12 AM	David Crim	

Address

6065 Roswell Road, Suite 710, Atlanta, NJ 30342

Email Address



Extract of OPRA Requestor Information

November 30, 2017

Page: 6 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

david@betterce.com

Requested Information

I would like to request the most recently updated list of all Resident and Non-Resident Licensed Life and Health Producers with their full name, License Number, NPN, Expiration Date, Email Address and Address. Please provide this information in Excel format and please send via email. I would appreciate it if you can provide the most updated list possible, listing the date it was updated. Thank you very much for your assistance.

Request #	Division	Date/Time	Requestor	Company Name
W124125	PAC	8/22/2017 2:12:32 PM	William Budesheim	

Address

Email Address

Requested Information

I filed a complaint with the Department of Banking and Insurance against Plymouth Rock. File # [REDACTED]. I would like electronic copies of all correspondence between DOBI and Plymouth Rock regarding this claim.

Request #	Division	Date/Time	Requestor	Company Name
W124098	REC	8/21/2017 3:44:12 PM	Elliott Caplan	Caplan School of Real Estate

Address

3455 State Route 66, Neptune City, NJ 07753-0775

Email Address

ecaplan@caplanschool.com

Requested Information

I am in need of additional instructors to teach pre-license and broker courses. Please provide me with a list of real estate licensed instructors with home addresses in Monmouth, Ocean and Middlesex counties. Please include all contact information. Thank you for your help and consideration.

Request #	Division	Date/Time	Requestor	Company Name
W125774	INS	10/13/2017 9:32:55 AM	Christina Saveriano	Hill Wallack LLP

Address

21 Roszel Road, Princeton, NJ 08540

Email Address

csaveriano@hillwallack.com

Requested Information

1. Copy of any correspondence from Starr Indemnity and Liability Company to DOBI from 8/2015 to the present. 2. Copy of any correspondence from DOBI to Starr Indemnity and Liability Company from 8/2015 to the present. 3. Copy of any email from Starr Indemnity and Liability Company to DOBI from 8/2015 to the present. 4. Copy of any email from DOBI to Starr Indemnity and Liability Company from 8/2015 to the present.

Request #	Division	Date/Time	Requestor	Company Name
W124789	CPS	9/14/2017 3:57:58 PM	Michael L Fialkoff	Day Pitney LLP

Address

1 Jefferson Road, Parsippany, NJ 07054

Email Address



Extract of OPRA Requestor Information

November 30, 2017

Page: 7 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

mfialkoff@daypitney.com

Requested Information

Please provide electronic copies of all documents related to any application or submission by Horizon Blue Cross Blue Shield of New Jersey (?Horizon?) since September 1, 2016, related to any changes which Horizon sought to make with respect to which Hospitals are Tier 1, Tier 2, and/or Alliance Partners in connection with Horizon?s OMNIA plans. This request, includes, but is not limited to: (1) Horizon?s re-designation of Capital Health System from Tier 2 to Tier 1, (2) Horizon?s re-designation of University Medical Center of Princeton at Plainsboro from Tier 1 to Tier 2, (3) Horizon?s re-designation of Shore Medical Center from Tier 1 to Tier 2, and (4) Horizon?s re-designation of AtlantiCare as an Alliance Partner.

Request #	Division	Date/Time	Requestor	Company Name
W125442	REC	10/3/2017 9:47:34 PM	Lillian DECOSIMO	

Address

[REDACTED]

Email Address

[REDACTED]

Requested Information

Real Estate / Property records for Australia DeCosimo DOB: [REDACTED] SSN: [REDACTED] Examination of any records

Request #	Division	Date/Time	Requestor	Company Name
W125696	PAC	10/11/2017 1:12:06 PM	David Crim	

Address

6065 Roswell Road suite 710, Atlanta, NJ 30328

Email Address

david@betterce.com

Requested Information

I would like to request the most recently updated list of all Resident and Non-Resident Licensed Property and Casualty Producers with their full name, License Number, NPN, Expiration Date, Email Address and Address. Please provide this information in Excel format and please send via email. I would appreciate it if you can provide the most updated list possible, listing the date it was updated. Thank you very much for your assistance.

Request #	Division	Date/Time	Requestor	Company Name
C125509	REC	10/5/2017 2:31:48 PM	Johnny Levy	

Address

, , NJ

Email Address

johnny@datajoe.com

Requested Information



Extract of OPRA Requestor Information

November 30, 2017

Page: 8 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

Under FOIA, can you also send me the following file: An Excel list of all registered Real Estate office (branch) locations in the state.

For each record, we'd like:

1. Office/Company Name
2. Office License Number
3. Office Address, City, State, ZIP, County
4. Office Phone Number
5. Associated Office Email Address
6. Managing Broker Name

Please let me know any cost for fulfillment of this request, and timeline for completion.

Please send immediately whatever fields above you are authorized to provide, even if there are certain data points you have to leave out.

Separately, if there are any data points that you are restricted from providing, please provide the reason for exemption.

Thanks for all your help!

Request #	Division	Date/Time	Requestor	Company Name
C125757	ADM	10/12/2017 4:04:17 PM	Molly Gutting-Warinsky	
Address [REDACTED]				
Email Address [REDACTED]				
Requested Information request for insurance and real estate licensee lists.				

Request #	Division	Date/Time	Requestor	Company Name
C123800	ADM	8/11/2017 9:54:24 AM	Michael Masdeo	
Address , , NJ				
Email Address [REDACTED]				
Requested Information I would like to request of public records a list of Mortgage Brokers in the state of New Jersey. If possible I would like the list to contain: Name of Company, Name of broker, Phone #, Email address Received Clarification from Requestor on 8.11.17, that willing to accept for mortgage brokers, the individual name, NMLS ID, email address, sponsoring company, and company address without charge. The list is provided in PDF format.				

Request #	Division	Date/Time	Requestor	Company Name
C124583	DEP	9/7/2017 1:39:38 PM	Gary Eisenberg	Perkin Coie
Address 30 Rockefeller Plaza, 22nd Floor, New York, NJ 10112				
Email Address geisenberg@perkinscoie.com				



Extract of OPRA Requestor Information

November 30, 2017

Page: 9 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

Requested Information

Request seeking application and documents for First Commerce Bank, and approvals related to mortgage lending by any bank using partnership home ownership structures.

Request #	Division	Date/Time	Requestor	Company Name
W123485	CFI	8/1/2017 2:13:37 PM	Daniel Zemel	
Address				
78 John Miller Way, Suite 430, Kearny, NJ 07032				
Email Address				
DZ@ZEMELLAWLLC.COM				
Requested Information				
I am seeking the Master List for consumer lender and sales finance licensees. Thank you.				

Request #	Division	Date/Time	Requestor	Company Name
W124578	ADM	9/7/2017 11:52:29 AM	MaryAnn Leuthe	Statewide Insurance Fund
Address				
One Sylvan Way, Parsippany, NJ 07054				
Email Address				
maleuthe@sifnj.com				
Requested Information				
Requesting copies of the 2016 Audit Financial Reports for the Garden State Municipal Joint Insurance Fund and the New Jersey Intergovernmental Insurance Fund. Thank you.				

Request #	Division	Date/Time	Requestor	Company Name
W124504	INS	9/5/2017 10:03:51 AM	Debra Conti	BUSINESS INFORMATION GROUP
Address				
[REDACTED]				
Email Address				
dconti@verticalscreen.com				
Requested Information				
I am writing to request public records for ACSIA Long Term Care, Inc. (FEIN# [REDACTED] NPN#7958728). NIPR reports an action date 01/10/2014 case#E14-08. I was not able to retrieve this Order on the website. Can you please send the Order for this action date? Thank you, Debra Conti X2061				

Request #	Division	Date/Time	Requestor	Company Name
W124729	LEG	9/13/2017 2:10:28 PM	James M Hirschhorn	Sills Cummis & Gross P.C.
Address				
1 Riverfront Plaza, Newark, NJ 07928				
Email Address				
jhirschhorn@sillscummis.com				
Requested Information				
All correspondence and other documents relating to the decision of Horizon Blue Cross Blue Shield to shift Shore Medical Center, Somers Point, NJ and/or University Medical Center of Princeton, Plainsboro, NJ from Tier 1 to Tier 2 in Horizon's Omnia network.				



Extract of OPRA Requestor Information

November 30, 2017

Page: 10 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

Request #	Division	Date/Time	Requestor	Company Name
C123718	SOL	8/9/2017 12:34:29 PM	Marjorie Morgan	Markel Reinsurance Administration
Address ,, NJ				
Email Address morgan@markelcorp.com				
Requested Information Schedule F - Part 1 from the 2016 Annual Statement for the following: Aspen Bermuda Limited ? U.S. Reinsurance Trust				

Request #	Division	Date/Time	Requestor	Company Name
W124979	BAN	9/20/2017 4:57:44 PM	AMRO ABDELHALIM	
Address [REDACTED]				
Email Address [REDACTED]				
Requested Information on [REDACTED] indicated that i have cashed a check for [REDACTED] from this branch at that day [REDACTED] i would like to have any record of this incidence , included copy of the check, and video recording if its possible for my presents at that location at that day any any document that related to this thank you				

Request #	Division	Date/Time	Requestor	Company Name
W124822	PAC	9/15/2017 1:48:00 PM	David Cohen	Allstate Insurance Company
Address 1130 Route 22 East Suite 100, Bridgewater NJ, NJ 08807				
Email Address david.cohen@allstate.com				
Requested Information Good afternoon, I am requesting a copy of the June Semi-Annual Market Share report for ANJ Auto and Homeowners by Group and Company. This would be similar to request #W118887 from YE2016 information. I was advised in a prior request to wait until 9/15 to ask for the June information.				

Request #	Division	Date/Time	Requestor	Company Name
W126344	INS	10/31/2017 1:24:47 PM	Amy Holder	Security Title Guarantee
Address [REDACTED]				
Email Address aholder@esecuritytitle.com				
Requested Information Please provide a copy of the listing of all licensed title insurance AGENCIES in New Jersey. Please include in state and out of state AGENCIES. Thank you				

Request #	Division	Date/Time	Requestor	Company Name
W124329	LAH	8/28/2017 4:03:59 PM	Jessica Parker	The Parker Group



Extract of OPRA Requestor Information

November 30, 2017

Page: 11 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

Address
1111 Markkress Rd, STE 201, Cherry Hill, NJ 08003-0800
Email Address
Jparkergroup@yahoo.com
Requested Information
To whom it may concern, we would like an updated new list of all the newly Life and Health insurance licensed resident producers in NJ, that received their licenses since January of 2017 to current. We would like emails and phone number for copying. Please send as excel file. Thank you

Request #	Division	Date/Time	Requestor	Company Name
W124034	LAH	8/18/2017 11:55:11 AM	Jennifer Sklar	SJ Health Insurance Advocates
Address				
570 West Mt. Pleasant Avenue, Suite 204, Livingston, NJ 07039-0703				
Email Address				
js@sjhia.com				
Requested Information				
SJ Health Insurance Advocates is requesting the following information with regard to denied insurance claims that are appealed through the State of New Jersey Dept. Banking and Insurance. 1. How many appeals are filed each year?2. What number or percentage of appeals are overturned in the member's favor?3. How many IUROs does NJ Dept of Banking and Insurance contract with?4. What are the names of the IUROs that NJ contracts with?				

Request #	Division	Date/Time	Requestor	Company Name
C126692	SOL	11/9/2017 1:26:05 PM	Alfred Lee	
Address				
, , NJ				
Email Address				
alfred@theinformation.com				
Requested Information				
Request for the most recent version of Oscar Insurance's annual financial statement				

Request #	Division	Date/Time	Requestor	Company Name
C123816	ADM	8/11/2017 2:50:35 PM	Carlos Plana	Gables Insurance Recovery
Address				
4649 Ponce De Leon Blvd, Suite 301, Coral Gables, NJ 33146				
Email Address				
mary.rivas@gablesinsrec.com				
Requested Information				
We would like to request a copy of list of all Licensed Public Adjusters (Individuals) in the State of New Jersey. If possible, we would like to receive the information via ?Excel? format. Please advise . Thank you.				

Request #	Division	Date/Time	Requestor	Company Name
C124094	ADM	8/21/2017 2:51:15 PM	Amy Rotella	
Address				
, , NJ				



Extract of OPRA Requestor Information

November 30, 2017

Page: 12 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

Email Address

amy.rotella.badger@aon.com

Requested Information

Insurance list for individual, new jersey residents, life insurance, accident & health or sickness

Request #	Division	Date/Time	Requestor	Company Name
W125265	COM	9/28/2017 3:18:43 PM	Vito Gagliardi	Porzio, Bromberg & Newman, PC

Address

100 Southgate Parkway, Morristown, NJ 07960

Email Address

jaciaburri@pbnlaw.com

Requested Information

1. All communications mentioning Meadowlands Hospital, Dr. Richard Lipsky, Tamara Dunaev, Pavel Pogodin or Anastasia Burlyuk between the Department of Banking and Insurance and the New Jersey Association of Health Plans from January 1, 2010 to present. 2. All communications between the Department of Banking and Insurance and the New Jersey Association of Health Plans members including, but not limited to, anyone at Aetna, Inc., Cigna Corp., AmeriGroup, AmeriHealth New Jersey, Anthem, Inc., United Healthcare, Wellcare Health Plans, Inc., or AmeriChoice which mentions Meadowlands Hospital, Dr. Richard Lipsky, Tamara Dunaev, Pavel Pogodin or Anastasia Burlyuk, from January 1, 2010 to present. 3. All communications between the Department of Banking and Insurance and the New Jersey Association of Health Plans board members which mentions Meadowlands Hospital, Dr. Richard Lipsky, Tamara Dunaev, Pavel Pogodin or Anastasia Burlyuk, from January 1, 2010 to present. 4. All communications between the Department of Banking and Insurance and the New Jersey Association of Health Plans employees which mentions Meadowlands Hospital, Dr. Richard Lipsky, Tamara Dunaev, Pavel Pogodin or Anastasia Burlyuk, from January 1, 2010 to present. 5. All communications between the Department of Banking and Insurance and Health Professionals and Allied Employees which mentions Meadowlands Hospital, Dr. Richard Lipsky, Tamara Dunaev, Pavel Pogodin or Anastasia Burlyuk, from January 1, 2010 to present. 6. All communications between the Department of Banking and Insurance and NJ Spotlight, Politicker NJ, The Record, The Star Ledger, The Jersey Journal, New Jersey Business, New Jersey Media Group, or State Street Wire which mentions Meadowlands Hospital, Dr. Richard Lipsky, Tamara Dunaev, Pavel Pogodin or Anastasia Burlyuk from January 1, 2010 to present. 7. All communications between the Department of Banking and Insurance and the New Jersey Health Care Quality Institute which mentions Meadowlands Hospital, Dr. Richard Lipsky, Tamara Dunaev, Pavel Pogodin or Anastasia Burlyuk from January 1, 2010 to present. 8. All communications between the Department of Banking and Insurance and NJ Appleseed which mentions Meadowlands Hospital, Dr. Richard Lipsky, Tamara Dunaev, Pavel Pogodin or Anastasia Burlyuk from January 1, 2010 to present. 9. All communications between the Department of Banking and Insurance and New Jersey Citizen Action Committee which mentions Meadowlands Hospital, Dr. Richard Lipsky, Tamara Dunaev, Pavel Pogodin or Anastasia Burlyuk from January 1, 2010 to present. 10. All communications between the Department of Banking and Insurance and Message Media which mentions Meadowlands Hospital, Dr. Richard Lipsky, Tamara Dunaev, Pavel Pogodin or Anastasia Burlyuk from January 1, 2010 to present. 11. All communications between the Department of Banking and Insurance and The Leapfrog Group which mentions Meadowlands Hospital, Dr. Richard Lipsky, Tamara Dunaev, Pavel Pogodin or Anastasia Burlyuk from January 1, 2010 to present.

Request #	Division	Date/Time	Requestor	Company Name
W125317	ADM	9/30/2017 1:38:13 PM	JOSE F TORRES	

Address

Email Address

Requested Information

Please I need any type of payments made by the insurance and court records made in the case of [REDACTED] Man who died on [REDACTED] in a construction accident at [REDACTED] Contractor Pat Montalbano. Hope to hear from you soon. EMAIL ADDRESS [REDACTED]



Extract of OPRA Requestor Information

November 30, 2017

Page: 13 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

Request #	Division	Date/Time	Requestor	Company Name
W123546	INS	8/2/2017 7:34:02 PM	Marie V Cole	
Address [REDACTED]				
Email Address [REDACTED]				
Requested Information Insurance File NJM Insurance Company regarding self defense claims Claimant [REDACTED]				

Request #	Division	Date/Time	Requestor	Company Name
W124992	PAC	9/21/2017 9:45:14 AM	Kurt H Andariese	
Address [REDACTED]				
Email Address kandariese@plymouthrock.com				
Requested Information Three Auto Reports as of June 30, 2017. 1. NJDOBI - Private Passenger Auto Semi-Annual Reports in-Force Exposures - Total Market - Sorted by Territory. 2. NJDOBI- Private Passenger Auto Semi-Annual Reports In-Force Exposures by Group - Total Market. 3. NJDOBI Private Passenger Auto Exposures Report Exposures by Policy class for Group and Company for Current Period. One Homeowner Report as of June 30, 2017. 1. NJDOBI Homeowners market Survey				

Request #	Division	Date/Time	Requestor	Company Name
W126691	INS	11/9/2017 1:12:32 PM	Debra Conti	BUSINESS INFORMATION GROUP
Address [REDACTED]				
Email Address dconti@verticalscreen.com				
Requested Information I am writing today to request public records for Dylan F. Monteforte ([REDACTED] NPN# 8584875). NIPR reports an action date of 10/21/2011, case# E11-82. Can you please send the Order(s) for this action date? thank you! Debra Conti X2061				

Request #	Division	Date/Time	Requestor	Company Name
C123715	ADM	8/9/2017 12:09:06 PM	Malegni Abreu	WellCare Health Plans, Inc.
Address 550 Broad St, 12th Floor, Newark, NJ 07102				
Email Address malegni.abreu@wellcare.com				
Requested Information I need list of license insurance producer for NJ with Contact information. Requestor clarified: Resident and Non-Resident / Lines of authority Accident Health and Sickness.				

Request #	Division	Date/Time	Requestor	Company Name
W123730	INS	8/9/2017 3:21:20 PM	Amanda Shiber	Medical Society of New Jersey



Extract of OPRA Requestor Information

November 30, 2017

Page: 14 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

Address

2 Princess Road, Lawrenceville, NJ 08648

Email Address

ashiber@msnj.org

Requested Information

Please provide copies of any and all comments submitted regarding the following rule pre-proposals: SYNOPSIS OF PROPOSAL TO AMEND N.J.A.C.11:24-1.2 AND N.J.A.C. 11:24A-1.2 AND 2.3; SYNOPSIS OF PROPOSAL TO AMEND N.J.A.C. 11:2-17.9, N.J.A.C. 11:24-8.7, AND N.J.A.C. 11:24A-3.7; and SYNOPSIS OF PROPOSAL TO AMEND N.J.A.C. 11:22-1.2 THROUGH 1.10 AND NEW RULE N.J.A.C. 11:22-1.5. Thank you.

Request #	Division	Date/Time	Requestor	Company Name
W125302	REC	9/29/2017 1:57:20 PM	Nicole Plath	Fortune Title Agency, Inc.

Address

39 Woodland Road, Roseland, NJ 07068

Email Address

nicole@fortunereo.com

Requested Information

I am the current Vice-Chair of the New Jersey Land Title Association Agency Section. In an effort to recruit members, we would like a list of all resident and non-resident title producers in the state of New Jersey.

Request #	Division	Date/Time	Requestor	Company Name
C125507	ADM	10/5/2017 2:23:50 PM	Matthew Appel	

Address

, , NJ

Email Address

Matthew.Appel@axa-advisors.com

Requested Information

I am hereby requesting an electronic list of all life insurance licensees located in Monmouth County.

If you can send in database form, that would be appreciated.

Request #	Division	Date/Time	Requestor	Company Name
W126512	CPS	11/3/2017 3:10:17 PM	Matthew T Baskir	

Address

1735 K Street NW, Washington, NJ 20006

Email Address

matthew.baskir@finra.org

Requested Information

I am looking for any information and documents about disciplinary or punitive actions, allegations or findings involving a licensed insurance agent in the State of New Jersey: Larry R. Weinbaum (NJ Ref. No. 9697869), [REDACTED]. Thank you for your assistance and please contact me with any questions.

Request #	Division	Date/Time	Requestor	Company Name
C124698	REC	9/12/2017 4:39:06 PM	Madel Asistio	CRES Insurance Services



Extract of OPRA Requestor Information

November 30, 2017

Page: 15 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

Address
, , NJ
Email Address
MAstio@cresinsurance.com
Requested Information
I would like to request a real estate roster including the following license types: ? Branch Office ? Broker of Record ? Broker/Salesperson ? Real Estate Company ? Referral Agent ? Salesperson With the following statuses: ? Actively Licensed ? Suspended ? Revoked ? Surrendered ? Inactive

Request #	Division	Date/Time	Requestor	Company Name
W126683	BAN	11/9/2017 9:53:36 AM	Tyler N Hewitt	Discovery Data
Address				
12 Christopher Way, Ste 202, Eatontown, NJ 07724				
Email Address				
thewitt@discoveryco.com				
Requested Information				
Please provide the following information for all Life, Accident and Health or Sickness, Property, Casualty, Viatical/Life Settlement, Personal Lines, Surplus Lines, and Variable insurance agents that are licensed in New Jersey, regardless of their state of residence: ● National Producer Number ● Agent First Name● Agent Middle Name● Agent Last Name● Agent Suffix Name● Agent Employer ● Business Address (Street1, Street2, City, State, Zip Code) ● Business Phone Number ● Email Address ● License Number● License Status (Active Only) ● License Type● License Effective Date ● License Expiration Date● Authorization Lines (As specified above) Please send the requested data to me in Excel format to the email address provided.				

Request #	Division	Date/Time	Requestor	Company Name
C125709	ADM	10/11/2017 3:06:12 PM	Ben Wolf	
Address				
, , NJ				
Email Address				
ben@capeschool.com				
Requested Information				
Request for all insurance licensee lists, for NJ individuals and NJ organizations.				

Request #	Division	Date/Time	Requestor	Company Name
W126209	REC	10/26/2017 3:21:00 PM	Lawrence Haynes	
Address				



Extract of OPRA Requestor Information

November 30, 2017

Page: 16 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

Email Address				
Requested Information				
Sales Persons, Brokers Associate, Brokers for Entire State				
Request #	Division	Date/Time	Requestor	Company Name
W126607	IHC	11/7/2017 2:31:39 PM	William J Begley	NBN Group
Address				
2 Pin Oak Lane, Suite 250, Cherry Hill, NJ 08003				
Email Address				
wbegley@nbngroup.com				
Requested Information				
The written contract between United Health Care and the State of New Jersey establishing the basis for which United Health Care offers health insurance plans to members residing in the state of New Jersey.				
Request #	Division	Date/Time	Requestor	Company Name
W126481	LAH	11/3/2017 8:41:15 AM	Stephen Libby	
Address				
101 Wymore Rd, Suite 539, Altamonte Springs, NJ 32714-3271				
Email Address				
stevel@orbusmarketing.com				
Requested Information				
I would like a list of all registered insurance agencies/agents for the state of NJ				
Request #	Division	Date/Time	Requestor	Company Name
W126302	INS	10/30/2017 1:50:43 PM	EDWARD SIRAZI	
Address				
Email Address				
Requested Information				
Prudential Computer share company informed me that unclaimed check were not deposited & transferred to New Jersey unclaimed funds division, I would like a copy of the funds not claimed				
Request #	Division	Date/Time	Requestor	Company Name
W123570	PAC	8/3/2017 12:57:11 PM	Erin Schapker	
Address				
101 Hudson St, Jersey City, NJ 07302				
Email Address				
erin.schapker@icg360.com				
Requested Information				



Extract of OPRA Requestor Information

November 30, 2017

Page: 17 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

Could I please get an electronic copy of "N.J.A.C. 11:2-42.10 requires homeowner writers to report semi-annually producer and exposure data. (Homeowners Market Survey)" for 2015, 2016, and 2017. And also if you have any available data on premiums inforce by coverage form for all carriers for 2016.

Request #	Division	Date/Time	Requestor	Company Name
W124149	CFI	8/23/2017 9:12:49 AM	Jason M Guthrie	Temple View Capital
Address				
7500 Old Georgetown Road, Bethesda, NJ 20814-2081				
Email Address				
jguthrie@templeviewcap.com				
Requested Information				
I would like to request information for all licensed Loan Officers and related contact information (business, email, phone number, address, etc.)				

Request #	Division	Date/Time	Requestor	Company Name
C123560	ADM	8/3/2017 10:54:54 AM	Chuck DeBerry	CBP
Address				
1100 Summer Street, Stamford, NJ 06905				
Email Address				
cdeberry@cbp.com				
Requested Information				
I would like a comprehensive list of P&C agencies in the state of NJ @ our earliest convenience.				
Please let me know what information you need from me to develop this list.				
Thank you.				

Request #	Division	Date/Time	Requestor	Company Name
C123701	SOL	8/8/2017 4:18:45 PM	Marjorie Morgan	Markel ? Reinsurance Administration
Address				
, , NJ				
Email Address				
morgan@markelcorp.com				
Requested Information				
Dear Mr. Sornson,				
Good afternoon.				
On behalf of Wayne Cordi, Director of Ceded Reinsurance Accounting at Markel Corporation, we are seeking to obtain a copy of Schedule F - Part 1 from the 2016 Annual Statement for the following two reinsurers who are domiciled in the state of New Jersey.				
VALIDUS REINSURANCE (SWITZERLAND) LTD (U.S. Reinsurance Trust)				
VALIDUS REINSURANCE LTD (U.S.Reinsurance Trust)				
Would you be able to provide us this information and if not, do you know how we may obtain it?				
Thanks in advance for your assistance in this matter.				



Extract of OPRA Requestor Information

November 30, 2017

Page: 18 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

Request #	Division	Date/Time	Requestor	Company Name
C125893	CPS	10/17/2017 2:48:23 PM	Barbara Dyevoich	
Address ,, NJ				
Email Address [REDACTED]				
Requested Information As per the freedom of information act, please supply me with the following information. All correspondence, documentation, transcripts, recordings and records in regard to my complaint (file # [REDACTED]) between you and your organization, with Horizon Blue Cross and Blue Shield of NJ.				

Request #	Division	Date/Time	Requestor	Company Name
W126345	IMS	10/31/2017 1:36:05 PM	Justin D Tompkins	AccuPoint Solutions
Address [REDACTED]				
Email Address [REDACTED]				
Requested Information Please provide the following information for all life, accident and health or sickness, property, casualty, viatical/life settlement, personal lines, surplus lines and variable insurance agents that are licensed in New Jersey, regardless of their state of residence: National Producer Number; Agent Name; Business Address (Street1, Street2, City, State, Zip Code); Business Phone Number; Email Address; License Number; License Status (Active Only); License Type; License Effective Date; License Expiration Date; Authorization Lines as specified above. Please send the requested data to me in Excel format to the email address provided.				

Request #	Division	Date/Time	Requestor	Company Name
W125862	REC	10/16/2017 10:37:54 PM	Christopher Wright	
Address [REDACTED]				
Email Address [REDACTED]				
Requested Information I would like to know how many people are employed at the commission. I would like to know the salaries and job titles. Dates of employment of these individuals. I would also like to know if the commission is hiring.				

Request #	Division	Date/Time	Requestor	Company Name
W125592	REC	10/9/2017 11:55:37 AM	Lawrence W Luttrell	Lawrence W. Luttrell, Esq
Address 2137 State Route 35 3rd Floor, Holmdel, NJ 07733-0773				
Email Address larryluttrell@lwpc.com				
Requested Information Please confirm whether the entity, "Columbia National Incorporated" held any license under the New Jersey Licensed Lenders Act on June 4, 2004. If the entity held such a license, please send a copy of the document confirming the existence of that license on the aforesaid date. Thank you.				



Extract of OPRA Requestor Information

November 30, 2017

Page: 19 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

Request #	Division	Date/Time	Requestor	Company Name
W123614	PAC	8/4/2017 5:32:23 PM	Barb Rauh	West Bend Mutual Insurance Company
Address 1900 S 18th Avenue, West Bend, NJ 53095-5309				
Email Address brauh@wbmi.com				
Requested Information I would like to order copies of the most current (2016) Report of Executive Compensation for the following company:? Selective InsuranceI would greatly appreciate receiving the information via email if that is convenient for you.If you have any questions, please give me a call at 262-338-5070.Thank you.				
Request #	Division	Date/Time	Requestor	Company Name
W123729	ADM	8/9/2017 3:18:44 PM	Leslie Stubblefield	Insurance Media Services
Address [REDACTED]				
Email Address leslie@insurancemediaservices.com				
Requested Information I would like a list of all resident and non-resident producers for your state with all fields of info. Life, Health, Property, Casualty and Variable licenses. Thank you so much for the speedy callback, remembering who I am and helping me find this form! :)				
Request #	Division	Date/Time	Requestor	Company Name
W124765	SOL	9/14/2017 1:31:58 PM	Paige Berry	Saul Ewing Arnstein & Lehr, LLP
Address 650 College Road East Suite 4000, Princeton, NJ 08540-6603				
Email Address paige.berry@saul.com				
Requested Information Please provide a copy of the audited financials for Fund Year 2015 AND Fund Year 2016 for the Middlesex County Municipal Joint Insurance Fund and for the Garden State Municipal Joint Insurance Fund. Joint Insurance Funds are required to file their audited financials with NJDOBI by June 30th. Thank You Paige				
Request #	Division	Date/Time	Requestor	Company Name
C125406	REC	10/3/2017 10:55:03 AM	Sally Ferdinando	
Address [REDACTED]				
Requested Information Request for licensee list of company, broker of record, broker salesperson, referral agent, branch office, salesperson, in Essex County.				
Request #	Division	Date/Time	Requestor	Company Name
C125799	LEG	10/13/2017 3:24:30 PM	Chris Jacobs	Juniper Research Group
Address				



Extract of OPRA Requestor Information

November 30, 2017

Page: 20 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

, , NJ
Email Address chris@juniperresearchgroup.com
Requested Information I would like to make a public records request for information relating to plan bids and cost-sharing reduction payments as it relates to bids for the current (i.e., 2017) plan year. Specifically, I would like to review any and all documents discussing the May 12, 2016 federal district court ruling in <i>House v. Price</i> (formerly <i>House v. Burwell</i>), and whether and how that court ruling and the status of cost-sharing reduction payments affected insurer plan bids, your office's rate assumptions, and the contracting process for the 2017 plan year. If you have any questions, feel free to contact me as listed below. Thanks in advance for your time, and I look forward to hearing from you.

Request #	Division	Date/Time	Requestor	Company Name
W123673	PAC	8/8/2017 9:21:34 AM	Joseph Valenzuela	
Address 1011 RT 22 West, Suite 300, PO Box 6881, Bridgewater, NJ 08807				
Email Address jvalenzuela@grsl.com				
Requested Information I am currently involved in insurance coverage litigation involving the denial of a claim under an American European Insurance Company policy for the policy term of 2/26/2013 to 2/26/2014, Policy [REDACTED]. The denial is based on an Assault and Battery Exclusion Endorsement, Form AE0002 0607. I am requesting records to determine whether American European Insurance Company (AEIC) ever filed its Assault and Battery Exclusion Endorsement, Form Number AE00020607. If it was filed with the State, I would like to know when. The Endorsement was allegedly written by AEIC around 2007, and was used starting at that time. Please provide any information via e-mail, or if faster, via inspection and copying. I am on a very strict deadline for this information.				

Request #	Division	Date/Time	Requestor	Company Name
C124047	PAC	8/18/2017 3:04:25 PM	Ignace Kuchazik	
Address , , NJ				
Email Address ikuchazik@transre.com				
Requested Information Hello, If possible, could you send to me, or point me to where I can find, the AAIS policy form endorsement GL-899 (v2.0) the ?Cross Liability Exclusion? ? The line of business is CMP 5.0. I believe this is a NJ filed & approved form. Thanks, Ignace Kuchazik				

Request #	Division	Date/Time	Requestor	Company Name
W125980	LAH	10/19/2017 3:16:13 PM	Sarah Martin	WM PAGE & ASSOCIATES
Address 1979 Lakeside Parkway #200, Tucker, NJ 30084-3008				



Extract of OPRA Requestor Information

November 30, 2017

Page: 21 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

Email Address

COMPLIANCE@THELIFELINE.COM

Requested Information

I am requesting copies of the Viatical Settlement Provider (VSP) Yearly Reports, Schedule A, for the years 2014, 2015, and 2016 for all NJ-licensed viatical settlement providers. I have set the maximum authorized cost as \$200, but if it should be more than that, please contact me with the amount and I will seek approval for the cost. Please let me know if you need additional information to complete this request. Thank you, Sarah Martin

Request #	Division	Date/Time	Requestor	Company Name
W125754	LEG	10/12/2017 3:20:20 PM	Marc M Orlow	Begelman & Orlow, PC

Address

411 Route 70 East, Cherry Hill, NJ 08034

Email Address

marc.orlow@begelmanorlow.com

Requested Information

Corporate organization filings for Amerihealth Ins. Co of New Jersey; Amerihealth and Independence Blue Cross

Request #	Division	Date/Time	Requestor	Company Name
W124833	LEG	9/15/2017 4:41:11 PM	James M Hirschhorn	Sills Cummis & Gross P.C.

Address

1 Riverfront Plaza, Newark, NJ 07928-0792

Email Address

jhirschhorn@sillscummis.com

Requested Information

All correspondence and other documents relating to the decision of Horizon Blue Cross Blue Shield to shift any hospital between Tier 1 and Tier 2 in Horizon's Omnia network.

Request #	Division	Date/Time	Requestor	Company Name
C123749	SOL	8/10/2017 9:46:11 AM	Marjorie Morgan	Markel Reinsurance Administration

Address

, , NJ

Email Address

morgan@markelcorp.com

Requested Information

Schedule F - Part 1 from the 2016 Annual Statement for the following: AXIS Specialty Limited (U.S. Reinsurance Trust)

Request #	Division	Date/Time	Requestor	Company Name
W123635	REC	8/7/2017 10:47:44 AM	Jake PEARSON	Associated Press

Address

200 LIBERTY ST. - 5TH FLOOR, NEW YORK, NJ 10001-1000

Email Address

JPEARSON@AP.ORG

Requested Information



Extract of OPRA Requestor Information

November 30, 2017

Page: 22 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

Under the state's open records law, I am seeking the following information be provided to me:(a) Any and all complaints received by the Real Estate Commission between 8/7/2007, and today, 8/7/2017, regarding attorney Bruce Baldinger or his law firm, Law Offices of Bruce E. Baldinger.(b) Any and all complaints received by the Real Estate Commission between 8/7/2007, and today, 8/7/2017, regarding real estate broker Jeffrey Yohai.

Request #	Division	Date/Time	Requestor	Company Name
C123628	REC	8/7/2017 8:43:02 AM	Madel Asistio	CRES Insurance Services
Address , , NJ				
Email Address MAstio@cresinsurance.com				
Requested Information <i>I would like to request a real estate roster including the following license types: ? Branch Office ? Broker of Record ? Broker/Salesperson ? Real Estate Company ? Referral Agent ? Salesperson With the following statuses: ? Actively Licensed ? Suspended ? Revoked ? Surrendered ? Inactive</i>				

Request #	Division	Date/Time	Requestor	Company Name
W126210	LAH	10/26/2017 3:30:24 PM	Christopher Jacobs	
Address 752 Ninth Street SE #102, Washington, NJ 20003				
Email Address chris@juniperresearchgroup.com				
Requested Information <i>I would like to review any guidance provided to health insurance carriers regarding cost-sharing reduction payments and their filings for the 2017 plan year. Specifically, I would like to review any instructions given to insurers as to whether or not they should assume that cost-sharing reductions would, or would not, be paid when filing rates for the 2017 plan year. To save on postage costs, I am happy to receive the relevant document(s) in electronic format. If you have any questions, please feel free to contact me. Thank you for your time.</i>				

Request #	Division	Date/Time	Requestor	Company Name
C126258	CPS	10/27/2017 2:59:47 PM	David Roundtree	
Address , , NJ				
Email Address save_achildinc@yahoo.com				
Requested Information				



Extract of OPRA Requestor Information

November 30, 2017

Page: 23 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

- 1, Record request is Complaint against Kimberly Williams reference to a lost application from the State Auto Insurance Plan
2. The Month Jan of 2015 to Feb of 2015
- 3 any record about the lost application, dealing with the complaint, the investigation of the complaint, the outcome of the case

Request #	Division	Date/Time	Requestor	Company Name
C126259	CPS	10/27/2017 3:01:24 PM	David Roundtree	
Address				
, , NJ				
Email Address				
save_achildinc@yahoo.com				
Requested Information				
1, Record request is Complaint against Kimberly Williams reference to a lost application from the State Auto Insurance Plan				
2. The Month March of 2015 to April of 2015				
3 any record about the lost application, dealing with the complaint, the investigation of the complaint, the outcome of the case				

Request #	Division	Date/Time	Requestor	Company Name
C126260	CPS	10/27/2017 3:03:20 PM	David Roundtree	
Address				
, , NJ				
Email Address				
save_achildinc@yahoo.com				
Requested Information				
1, Record request is Complaint against Kimberly Williams reference to a lost application from the State Auto Insurance Plan				
2. The Month May of 2015 to June of 2015				
3 any record about the lost application, dealing with the complaint, the investigation of the complaint, the outcome of the case				

Request #	Division	Date/Time	Requestor	Company Name
C126261	CPS	10/27/2017 3:04:48 PM	David Roundtree	
Address				
, , NJ				
Email Address				
save_achildinc@yahoo.com				
Requested Information				
1, Record request is Complaint against Kimberly Williams reference to a lost application from the State Auto Insurance Plan				
2. The Month July of 2015 to Aug of 2015				
3 any record about the lost application, dealing with the complaint, the investigation of the complaint, the outcome of the case				

Request #	Division	Date/Time	Requestor	Company Name
C126262	CPS	10/27/2017 3:06:54 PM	David Roundtree	
Address				
, , NJ				
Email Address				



Extract of OPRA Requestor Information

November 30, 2017

Page: 24 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

save_achildinc@yahoo.com

Requested Information

- 1, Record request is Complaint against Kimberly Williams reference to a lost application from the State Auto Insurance Plan
2. The Month Sept of 2015 to Oct of 2015
- 3 any record about the lost application, dealing with the complaint, the investigation of the complaint, the outcome of the case

Request #	Division	Date/Time	Requestor	Company Name
C126263	CPS	10/27/2017 3:08:27 PM	David Roundtree	

Address

, , NJ

Email Address

save_achildinc@yahoo.com

Requested Information

- 1, Record request is Complaint against Kimberly Williams reference to a lost application from the State Auto Insurance Plan
2. The Month Nov of 2015 to Dec of 2015
- 3 any record about the lost application, dealing with the complaint, the investigation of the complaint, the outcome of the case

Request #	Division	Date/Time	Requestor	Company Name
W124904	ADM	9/19/2017 9:02:42 AM	Lisa A Chabak	First American Title

Address

3 AAA Drive, Suite 201, Robbinsville, NJ 08691

Email Address

lchabak@firstam.com

Requested Information

I need to get a copy of all the NJ Title Insurance Agency in NJ.

Request #	Division	Date/Time	Requestor	Company Name
W126993	REC	11/20/2017 11:08:43 AM	Steve Jordan	Training Cove

Address

14301 N 87 St #106, Scottsdale, NJ 85260

Email Address

steve@trainingcove.com

Requested Information

We are a real estate continuing education provider and need a list of all real estate licensees in the state of New Jersey, including mailing addresses and email addresses if possible. We also need a list of real estate companies, in addition to the list of individual real estate licensees.

Request #	Division	Date/Time	Requestor	Company Name
W125695	LAH	10/11/2017 1:10:30 PM	David Crim	

Address

6065 Roswell Road suite 710, Atlanta, NJ 30328

Email Address



Extract of OPRA Requestor Information

November 30, 2017

Page: 25 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

david@betterce.com

Requested Information

I would like to request the most recently updated list of all Resident and Non-Resident Licensed Life and Health Producers with their full name, License Number, NPN, Expiration Date, Email Address and Address. Please provide this information in Excel format and please send via email. I would appreciate it if you can provide the most updated list possible, listing the date it was updated. Thank you very much for your assistance.

Request #	Division	Date/Time	Requestor	Company Name
W125576	LAH	10/6/2017 7:33:36 PM	Elizabeth Barnett	At Your Pace Online

Address

531 Ne F Street, Grants Pass, NJ 97526-9752

Email Address

elizabeth@atyourpaceonline.com

Requested Information

Hello, I'm with At Your Pace Online. We are an approved continuing education provider for New Jersey Insurance Producers. We would like to request a list of Resident Insurance Producer Licensees: Life, Health, Property, Casualty, Personal/Surplus lines and Adjusters from the New Jersey Department of Banking And Insurance that includes name, mailing address, license type, license number, license expiration, and email addresses. If there is anything else that I can do to facilitate this request please feel free to let me know. Once the request is complete please email the information to me at elizabeth@atyourpaceonline.com. Thank you, Elizabeth Barnett AYPO, LLC 531 NE F Street Grants Pass, OR 97526(541)237-6054 (Direct)

Request #	Division	Date/Time	Requestor	Company Name
W123793	AFC	8/10/2017 5:45:01 PM	Benjamin Blakeman	Blakeman Law

Address

611 Wilshire Blvd., Ste. 1208, Los Angeles, NJ 90017

Email Address

ben@lifeinsurance-law.com

Requested Information

I am requesting information concerning a 2014 disciplinary proceeding against National Western Life Insurance Company of Texas related to an order: NJ Dept. Insurance Order #E14-03 dated January 6, 2014. I would like any available information concerning the proceedings that resulted in that order. In addition, I would like the annual reports and interrogatories for National Western Life Insurance Company from the years 2010-2016. I would like electronic copies by email if possible.

Request #	Division	Date/Time	Requestor	Company Name
W123969	PAC	8/17/2017 8:17:35 AM	David Crim	

Address

6065 Roswell Road, Suite 710, Atlanta, NJ 30342

Email Address

david@betterce.com

Requested Information

I would like to request the most recently updated list of all Resident and Non-Resident Licensed Property and Casualty Producers with their full name, License Number, NPN, Expiration Date, Email Address and Address. Please provide this information in Excel format and please send via email. I would appreciate it if you can provide the most updated list possible, listing the date it was updated. Thank you very much for your assistance.

Request #	Division	Date/Time	Requestor	Company Name
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Extract of OPRA Requestor Information

November 30, 2017

Page: 26 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

W125241	REC	9/28/2017 11:10:27 AM	Anna Kagan	Mercer County Association of Realtors
Address 1428 Brunswick Ave, Trenton, NJ 08638				
Email Address akagan@mercerrealtors.com				
Requested Information I am looking for Hunderton/Somerset Association of Realtors. County are Hunderton and Somerset I need Active Broker Owners, Active Real Estate Agent I need First Name, Last Name, Company Name, Company Address, Company City, State and Zip, I need Email Address for Broker and Email Address Real Estate agent Thank You Anna Kagan 609-392-3666 ext. 114				
Request #	Division	Date/Time	Requestor	Company Name
W125480	REC	10/4/2017 3:27:05 PM	Noelle Frieson	Alexander Anderson Real Estate Group
Address 14 Bergen Street, Hackensack, NJ 07601				
Email Address nfrieson@alexander-anderson.com				
Requested Information I would like a list of all licensed real estate brokers in New Jersey - Bergen County Hudson County Essex County Whatever information you are able to give is fine. Thanks ! :)				
Request #	Division	Date/Time	Requestor	Company Name
W124804	PAC	9/15/2017 10:01:36 AM	David Crim	
Address 6065 Roswell Road, Suite 710, Atlanta, NJ 30328				
Email Address cristy@betterce.com				
Requested Information I would to request the most recently updated list of NJ Resident Licensed Property and Casualty Producers with their full name, License Number, NPN, Expiration Date, Email Address and Address. Please provide this information in excel format and please send via email. I would appreciate it if you can provide the most updated list possible, listing the date it was updated. Thank you very much for your assistance.				
Request #	Division	Date/Time	Requestor	Company Name
C125231	ADM	9/28/2017 8:23:16 AM	Roger Greff	
Address , , NJ				
Email Address roger.greff@prudential.com				
Requested Information All those newly ?Resident? licensed , in the last ?three? years for ?Life and Health? insurance in the Bergen, Passaic, Morris, Essex, Hudson and Union county.				
Request #	Division	Date/Time	Requestor	Company Name



Extract of OPRA Requestor Information

November 30, 2017

Page: 27 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

C125232	ADM	9/28/2017 8:23:25 AM	Michael Saccento	
Address ,, NJ				
Email Address Michael.Saccento@prudential.com				
Requested Information All those newly ?Resident? licensed , in the last ?three? years for ?Property and Casualty? insurance in the Bergen, Passaic, Morris, Essex, Hudson and Union county.				
Request #	Division	Date/Time	Requestor	Company Name
C124545	CFI	9/6/2017 1:29:25 PM	Dana Maki	Mortgage Brokers Association
Address 1460 US Highway 9 North, Suite 301, Woodbridge, NJ 07095				
Email Address dmaki@mbanj.com				
Requested Information Pursuant to the Open Public Records Act I hereby request the list of all Mortgage Related Licensees in the New Jersey Department of Mortgage Banking and Insurance, including Mortgage Bankers, Mortgage Brokers, Qualified Individuals and Mortgage Loan Originators.				
Request #	Division	Date/Time	Requestor	Company Name
W124976	BAN	9/20/2017 4:38:06 PM	AMRO ABDELHALIM	
Address [REDACTED]				
Email Address [REDACTED]				
Requested Information on [REDACTED] the owner has instated that gave me a check for [REDACTED] and i cashed on [REDACTED], which never happened i would like to have record from the bank about this instance				
Request #	Division	Date/Time	Requestor	Company Name
W124802	LAH	9/15/2017 9:54:06 AM	David Crim	
Address 6065 Roswell Road, Suite 710, Atlanta, NJ 30328				
Email Address david@bettterce.com				
Requested Information I would to request the most recently updated list of NJ Resident Licensed Life and Health Producers with their full name, LicenseNumber, NPN, Expiration Date, Email Address and Address. Please provide this information in excel format and please send via email. I would appreciate it if you can provide the most updated list possible, listing the date it was updated. Thank you very much for your assistance.				
Request #	Division	Date/Time	Requestor	Company Name
W125091	PAC	9/25/2017 12:53:15 PM	Lindsey Gelomini	Conventus Inter-Insurance Exchange



Extract of OPRA Requestor Information

November 30, 2017

Page: 28 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

Address

900 US 9 North, Suite 503, Woodbridge, NJ 07095

Email Address

lgelormini@conventusnj.com

Requested Information

Information and documents pertaining to Medical Mutual Insurance Company of North Carolina's current Legacy Fund program. E-mailed copies of the documents are preferred.

Request #	Division	Date/Time	Requestor	Company Name
W126190	LAH	10/26/2017 10:30:47 AM	Michael Coco	Coco Law Firm

Address

300 Carnegie Center Drive, Suite 150, Princeton, NJ 08540

Email Address

info@cocoalwfirm.com

Requested Information

Please provide me with the number and disposition of all first and second level appeals adjudicated by Horizon Blue Cross Blue Shield of New Jersey (BCBS) in the past 3 years for utilization management. Also provide the number and disposition of all third-level, external appeals filed with the Department against BCBS in the past 3 years for utilization management. If this information is held by a different department, please provide me with such department's contact information. If this request is denied for any reason, please provide me with the reason for denial and applicable legal citation. Thank you very much for your assistance.

Request #	Division	Date/Time	Requestor	Company Name
W124629	INS	9/11/2017 9:33:18 AM	Tyler N Hewitt	Discovery Data

Address

12 Christopher Way, Eatontown, NJ 07724

Email Address

thewitt@discoveryco.com

Requested Information

Please provide the following information for all Life, Accident and Health or Sickness, Property, Casualty, Viatical/Life Settlement, Personal Lines, Surplus Lines, and Variable insurance agents that are licensed in New Jersey, regardless of their state of residence: Agent First Name; Agent Middle Name; Agent Last Name; Agent Suffix Name; Agent Employer; Business Address (Street1, Street2, City, State, Zip Code); Business Phone Number; Email Address; License Number; License Status (Active Only); License Type; License Effective Date; License Expiration Date; Authorization Lines (As specified above). Please send the requested data to me in Excel format to the email address provided.

Request #	Division	Date/Time	Requestor	Company Name
C125607	SOL	10/10/2017 8:30:08 AM	Joseph Horan	Jasinski

Address

60 Park Place, 8th Floor, Newark, NJ 07102

Email Address

jhoran@jplawfirm.com

Requested Information

Request seeking documents related to City of Passaic self-insured status and PEJIF



Extract of OPRA Requestor Information

November 30, 2017

Page: 29 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

Request #	Division	Date/Time	Requestor	Company Name
C126521	LAH	11/3/2017 4:17:25 PM	Stephanie Robshaw	Bressler, Amery & Ross
Address				
325 Columbia Turnpike, Florham, NJ 07932				
Email Address				
srobshaw@bressler.com				
Requested Information				
We are interested in obtaining Insurance policy form and rate filings for health policies or endorsements with premium rate reductions for failure to Meet Service Levels or Performance Guarantees that the Department has on file. Please provide us with the requested documents or give guidance on obtaining same.				
Request #	Division	Date/Time	Requestor	Company Name
C125887	CFI	10/17/2017 1:01:21 PM	Alexander Crump	Troutman Sanders
Address				
1001 Haxall Point, PO Box 1122, Richmond, NJ 23218				
Email Address				
alex.crump@troutmansanders.com				
Requested Information				
Request seeking documents relating to money transmitter licensing rulings and determinations				
Request #	Division	Date/Time	Requestor	Company Name
W126386	PAC	11/1/2017 12:13:08 PM	Mariela Gonzalez	mariela gonzalez ins agcy llc
Address				
[REDACTED]				
Email Address				
[REDACTED]				
Requested Information				
list of people that have passed the property and casualty exam				
Request #	Division	Date/Time	Requestor	Company Name
C126686	ADM	11/9/2017 11:23:00 AM	Cristy Edwards	
Address				
, , NJ				
Email Address				
cristy@betterce.com				
Requested Information				
I would like to request the most recently updated list of all Resident and Non-Resident Licensed Life and Health Producers with their full name, License Number, NPN, Expiration Date, Email Address and Address. Please provide this information in Excel format and please send via email. I would appreciate it if you can provide the most updated list possible, listing the date it was updated. Thank you very much for your assistance.				
Also, the same request for all Resident and Non-Resident Licensed Property and Casualty Producers, please.				



Extract of OPRA Requestor Information

November 30, 2017

Page: 30 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

Request #	Division	Date/Time	Requestor	Company Name
W124382	CFI	8/30/2017 10:59:35 AM	edward hanratty	tomes & hanratty pc
Address				
1 west main st, freehold, NJ 07728				
Email Address				
thanratty@tomeslawfirm.com				
Requested Information				
All documents reflecting or referencing the surety bond posted by licensed mortgage lender Dynamic Financial Consultants INC, 502 Hamburg Tpke, Wayne NJ 07470 covering from the calendar year 2000 to present.				
Request #	Division	Date/Time	Requestor	Company Name
W124464	IHC	9/1/2017 10:05:31 AM	Marc Orlow	Begelman & Orlow
Address				
411 Route 70 East, Suite 245, Cherry Hill, NJ 08034				
Email Address				
marc.orlow@begelmanorlow.com				
Requested Information				
Requesting copies of AmeriHealth's submitted 2014 and 2015 applications to the State of New Jersey for the bronze, silver, gold and platinum health plans and all of their variations.				
Request #	Division	Date/Time	Requestor	Company Name
W124134	REC	8/22/2017 3:15:35 PM	Todd Long	
Address				
[REDACTED]				
Email Address				
tdlpropertiesllc@yahoo.com				
Requested Information				
Please provide information for the following property:270 Weber Ave Ewing, NJ 08638Please provide any/all regarding permits, liens, contracts, surveys etc..Thank you				
Request #	Division	Date/Time	Requestor	Company Name
C126717	CFI	11/9/2017 4:49:19 PM	Daniel Zemel	
Address				
78 John Miller Way, Suite 340, Kearny, NJ 07032				
Email Address				
dz@zemellawllc.com				
Requested Information				
consumer lender license verification for portfolio recovery associates.				
Request #	Division	Date/Time	Requestor	Company Name
C124791	SOL	9/14/2017 5:00:52 PM	Lizett Meraz	
Address				



Extract of OPRA Requestor Information

November 30, 2017

Page: 31 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

123 North Wacker Drive, Suite 860, Chicago, NJ 60606

Email Address

lizett.meraz@pearlmeyer.com

Requested Information

Under the New Jersey Open Public Records Act, N.J.S.A. 47:1A-1 et seq., I am requesting an opportunity to inspect or obtain copies of public records that would detail the most recent (i.e., 2016) compensation levels for the most senior executive positions at Horizon Blue Cross Blue Shield NJ. I am looking for information related to these executive's base salary levels, annual bonus amounts, and any long-term incentive awards.

Request #	Division	Date/Time	Requestor	Company Name
W126827	LEG	11/14/2017 4:29:51 PM	Rafael J Corbalan	The Law Office of Howard Davis, P.C.

Address

580 Sylvan Avenue, Suite 2D, Englewood Cliffs, NJ 07632

Email Address

rcorbalan@envirolawyer.net

Requested Information

Please provide electronic copies of any and all records, files, documents, data, figures, correspondence, and/or information related to the legislative review and approval of policy form IL 09 28 05 (85) which was issued as part of insurance policies made by Maryland Casualty Company in the 1980s.

Request #	Division	Date/Time	Requestor	Company Name
W126348	IMS	10/31/2017 1:51:40 PM	Justin D Tompkins	AccuPoint Solutions

Address

[REDACTED]

Email Address

[REDACTED]

Requested Information

Please provide the following information for all agents authorized to sell: Bail Bonds; Car Rental; Credit; Legal Insurance; Managing General Agent; Reinsurance Intermediary; Self Storage Personal Property, Ticket, Title, and Travel insurance products that are licensed in New Jersey, regardless of their state of residence: National Producer Number; Agent Name; Business Address (Street1, Street2, City, State, Zip Code); Business Phone Number; Email Address; License Number; License Status (Active Only); License Type; License Effective Date; License Expiration Date; Authorization Lines as specified above. Please send the requested data to me in Excel format to the email address provided.

Request #	Division	Date/Time	Requestor	Company Name
C126689	CFI	11/9/2017 12:23:43 PM	Daniel Zemel	

Address

78 John Miller Way, Suite 340, Kearny, NJ 07032

Email Address

dz@zemellawllc.com

Requested Information

Request for initial dates of licensure for LVNV Funding, Portfolio Recovery Associates, and Jefferson Capital Systems.

Request #	Division	Date/Time	Requestor	Company Name
W123890	INS	8/15/2017 1:24:43 PM	Sue Livio	



Extract of OPRA Requestor Information

November 30, 2017

Page: 32 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

Address 50 West State Street, Suite 1106, Trenton, NJ 08608-0860				
Email Address slivio@njadvancemedia.com				
Requested Information Please provide documents from insurance carriers seeking rate hikes for 2018.				

Request #	Division	Date/Time	Requestor	Company Name
W126876	LAH	11/16/2017 8:41:16 AM	Scott B Gorman	Gorman & Gorman, LLC

Address 457 Haddonfield Road, Suite 400, Cherry Hill, NJ 08002-2220				
Email Address sgorman@gormanlegal.com				
Requested Information Please email a copy of the following documents which were filed by American General Life Insurance Company (NAIC No. 60488) with the New Jersey Department of Banking and Insurance regarding Service of Process (Appointment of Commissioner) including but not limited to: (1) Uniform Consent to Service of Process; (2) Applicant Company Officers? Certification and Attestation; (3) Uniform Consent to Service of Process, Exhibit A; (4) Uniform Consent to Service of Process, Exhibit B; and (5) Resolution Authorizing Appointment of Attorney.				

Request #	Division	Date/Time	Requestor	Company Name
C125633	ADM	10/10/2017 12:35:33 PM	Benjamin Lin	Liberty Mutual Insurance

Address , , NJ				
Email Address Benjamin.Lin@LibertyMutual.com				
Requested Information OPRA request for personal lines licensee list				

Request #	Division	Date/Time	Requestor	Company Name
C124294	SOL	8/28/2017 8:35:19 AM	Chris Provera	Snell & Wilmer L.L.P.

Address One Arizona Center, Phoenix, NJ 85004				
Email Address cprovera@swlaw.com				
Requested Information I am conducting a survey of executive compensation on behalf of a client. The NAIC website indicates that Supplemental Compensation Exhibits are to be filed directly with each state's department of insurance and not with the NAIC. So, I am reaching out to see if your department might be willing to disclose the latest Executive Compensation Exhibit of Horizon Blue Cross and Blue Shield of New Jersey.				

Request #	Division	Date/Time	Requestor	Company Name
W124017	INS	8/17/2017 4:59:54 PM	jackson t horowitz	

Address				
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Extract of OPRA Requestor Information

November 30, 2017

Page: 33 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

35 progress place, voorhees, NJ 08043

Email Address

jthorowitz@claimsintl.com

Requested Information

I hereby request that the NJ DOBI promptly furnish me the following via email at my above email address: 1. The statute/statutes (if any such exists) which allows the insurance commissioner to deny a person a public adjuster's license solely based upon misdemeanor convictions. 2. The statute/statutes (if any such exists) which allows the insurance commissioner to deny a person a public adjuster's license solely based upon the existence of a probation term. Kindly furnish such documents if they exist to me via email. Thank you

Request #	Division	Date/Time	Requestor	Company Name
C125735	ADM	10/12/2017 11:27:55 AM	David J Roundtree	

Address

, , NJ

Email Address

save_achildinc@yahoo.com

Requested Information

all copies of Record requesting deals with a said Kimberly Williams a\Insurance agent complaint about a lost application complaint under the State insurance Plan in the years of 2014 to 2016

Request #	Division	Date/Time	Requestor	Company Name
W124784	IMS	9/14/2017 3:24:27 PM	David L Reibstein	NCP Ventures DBA Homarc

Address

114 Old York Road, Jenkintown, NJ 19046

Email Address

david.reibstein@homarcadvisors.com

Requested Information

This is a request for the disclosure statements for the Continuing Care Retirement Communities listed below. I would like to receive the documents in PDF form sent to the email above. Please feel free to call or email with any questions. -David Reibstein, 215-259-5225, david.reibstein@homarcadvisors.com Thank you for your attention to this matter. Bentley Senior Living, Pennsauken Brightview Greentree, Marlton Cadbury at Cherry Hill, Cherry Hill Cardinal Village, Sewell Collingswood Manor, Collingswood Evergreens, Moorsetown Friends Village at Woodstown, Woodstown Lions Gate, Voorhees Medford Leas, Medford The Fountains at Cedar Parke, Atco Wiley Christian Retirement Community, Marlton Woodbury Mews Independent Living, Woodbury Yardley Commons, Voorhees

Request #	Division	Date/Time	Requestor	Company Name
W126856	OMB	11/15/2017 2:20:14 PM	Madeline C Sweitzer	

Address

[REDACTED]

Email Address

[REDACTED]

Requested Information

To Whom It May Concern, I am requesting any licensure information, complaints, enforcement actions, etc. the Banking and Insurance Division maintains on the following businesses:- Associated Group Services - BAC II, Inc. - Copeland Companies - Queen Anne Distributors, Inc. - Jutland Food Group Inc. - All American Food Group, Inc. - All American Bagel Equipment - G.I.D. Distributors, Inc. Thank you!



Extract of OPRA Requestor Information

November 30, 2017

Page: 34 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

Request #	Division	Date/Time	Requestor	Company Name
W125839	INS	10/16/2017 3:10:31 PM	Summer J Klarfeld	Associated Appraisal Group, Inc.
Address 6 Commerce Drive, Cranford, NJ 07016				
Email Address Summer@njaag.com				
Requested Information To whom it may concern:For the property located at 320 Veterans Boulevard, Block: 219 Lot: 68.08. Please advise and provide if there have been any development approvals for the above referenced property. If approved, please provide such resolution and explanation of approved use, square footage and/or (#) number of units. If no approvals, please provide any applications made for such development approvals and explanation of approved use, square footage and/or (#) number of units. If no approvals or applications, Please respond with written verification that such request have not been made and/or granted. Sincerely,Summer J. Klarfeld				

Request #	Division	Date/Time	Requestor	Company Name
C124601	REC	9/8/2017 9:05:27 AM	Johnny Levy	Data LLC
Address 1790 30th St, Suite 300, Boulder, NJ 80301				
Email Address johnny@datajoe.com				
Requested Information Under the Open Public Records Act / FOIA, I am requesting to obtain an Excel file containing information for all licensed, active BROKERS OF RECORD, BROKER/SALESPERSONS, SALESPERSONS, REFERRAL AGENTS, REAL ESTATE COMPANIES, and BRANCH OFFICES in the state of New Jersey. I am requesting the following fields be included for each record: Record Name, License Number, Firm Name, Title at Firm, (if applicable) Address, City, State, ZIP, Phone, Email Address, Fax, Disciplinary Actions, (Y/N) Original License Date, License Status				

Request #	Division	Date/Time	Requestor	Company Name
W126962	LAH	11/17/2017 4:31:34 PM	Maureen Kayal	Lee, Nolan & Koroghlian
Address 250 Pehle Ave Suite 405, Saddle Brook, NJ 07663				
Email Address mkayal@financialguide.com				
Requested Information				



Extract of OPRA Requestor Information

November 30, 2017

Page: 35 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

I would like to receive an on-going list of candidates that successfully pass the Life and/or Health Exam in the NJ. I would like to be able to reach out and personally congratulate the candidate on achieving this great accomplishment. I could send them an email or mail a congratulatory letter. Please let me know what the process is to achieve this. I greatly appreciate your assistance. I was not sure what cost could be, therefore I inserted \$1 so I could submit my request.

Request #	Division	Date/Time	Requestor	Company Name
C126248	CPS	10/27/2017 2:40:24 PM	David Roundtree	
Address ,, NJ				
Email Address save_achildinc@yahoo.com				
Requested Information 1, Record request is Complaint against Kimberly Williams reference to a lost application from the State Auto Insurance Plan 2. The Month Sept of 2013 to Oct of 2013 3 any record about the lost application, dealing with the complaint, the investigation of the complaint, the outcome of the case				

Request #	Division	Date/Time	Requestor	Company Name
C126419	LAH	11/1/2017 4:12:51 PM	Ginger Dicke	Sedgewick
Address 801 S. Figueroa Street, 19th Floor, Los Angeles, NJ 90017				
Email Address ginger.dicke@sedgwicklaw.com				
Requested Information I am trying to find information on any filings done by NAIC #26344 from the late '90 would that information be available online?				

Request #	Division	Date/Time	Requestor	Company Name
W123754	LAH	8/10/2017 10:17:22 AM	Maggie C OGara	GWG Holdings, Inc.
Address 220 S 6th Street Suite 1200, Minneapolis, NJ 55402-5540				
Email Address mogara@gwglife.com				
Requested Information requesting copies of Sun Life Assurance Company of Canada approved forms in New Jersey, Sun Universal Protector LP3, Flex Premium UL Life Insurance policy ULG-20006G, UL-2002-ABR2G including pre-application for insurance, Non Licensed Territory Declaration (for non New York solicitations), Part I Application for Life Insurance (UND 14/550-G) and Part II Application for Life Insurance UND 14/270 (or SLPC 2396 11/03), and Charitable rider UL-2002-CGBRG, and Alteration of Application Form				

Request #	Division	Date/Time	Requestor	Company Name
W125528	PAC	10/5/2017 8:02:29 PM	LARRY M SEAL	WEST FLORIDA INSURANCE MANAGERS
Address 3 W GARDEN ST, STE 606, PENSACOLA, NJ 32502-3250				
Email Address [REDACTED]				



Extract of OPRA Requestor Information

November 30, 2017

Page: 36 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

Requested Information

Copy of the last financial examination of AMERICAN PROPERTY INSURANCE COMPANY completed by any jurisdiction on file with your department. The company is a New Jersey domiciled company.

Request #	Division	Date/Time	Requestor	Company Name
W125224	INS	9/27/2017 7:18:00 PM	Christy Saveriano	Hill Wallack LLP
Address				
21 Roszel Road, Princeton, NJ 08540				
Email Address				
csaveriano@hillwallack.com				
Requested Information				
Copy of all documents, communications, letters, and/or emails between Starr Indemnity & Liability Company ("Starr") and NJDOBI relating to the termination of the September 1, 2011 Agency Agreement between Starr and G&G Underwriters, LLC from September 11, 2014 until the present.				

Request #	Division	Date/Time	Requestor	Company Name
W125749	BAN	10/12/2017 2:31:01 PM	Sharon A Vanness	signature Information solutions LLC
Address				
300 Phillips Blvd, Ste. 400, Trenton, NJ 08618				
Email Address				
svanness@signatureinfo.com				
Requested Information				
Please obtain Certified Charter document for Cross River Bankon expedited basis				

Request #	Division	Date/Time	Requestor	Company Name
W125315	LAH	9/30/2017 12:07:52 PM	Gareth Rees	
Address				
15420 Briarwood Mnr, Davie, NJ 33331				
Email Address				
gdrees@synergynmo.com				
Requested Information				
Hi, We are national Insurance agency, looking to hire NJ insurance agents to offer our Health Insurance products. We are looking for a NJ licensed insurance agent list of agents authorized to sell Health Insurance. If possible we would like the following information. First Name Last Name Address Phone # Email Address NP NJ License # Resident and Non resident Agents Carriers they are appointed with (such as Humana, Aetna, etc) I was not sure of what to enter as cost as this file can be sent electronically. Thank You, Gareth Rees				

Request #	Division	Date/Time	Requestor	Company Name
C125386	ADM	10/2/2017 4:27:51 PM	Mallory O'Sullivan	WebCE
Address				
, , NJ				
Email Address				
Mallory.osullivan@webce.com				
Requested Information				



Extract of OPRA Requestor Information

November 30, 2017

Page: 37 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

List of insurance licensees

Request #	Division	Date/Time	Requestor	Company Name
W126346	IMS	10/31/2017 1:50:10 PM	Justin D Tompkins	AccuPoint Solutions
Address [REDACTED]				
Email Address [REDACTED]				
Requested Information Please provide the following information for all life, accident and health or sickness, property, casualty, viatical/life settlement, personal lines, surplus lines and variable insurance agents that are licensed in New Jersey, regardless of their state of residence: National Producer Number; Agent Name; Business Address (Street1, Street2, City, State, Zip Code); Business Phone Number; Email Address; License Number; License Status (Active Only); License Type; License Effective Date; License Expiration Date; Authorization Lines as specified above. Please send the requested data to me in Excel format to the email address provided.				

Request #	Division	Date/Time	Requestor	Company Name
W126453	IMS	11/2/2017 12:21:49 PM	Justin D Tompkins	AccuPoint Solutions
Address [REDACTED]				
Email Address [REDACTED]				
Requested Information Please provide, in separate files, the following information for (1) property and (2) casualty agents that are licensed in New Jersey, regardless of their state of residence: National Producer Number; Agent Name; Business Address (Street1, Street2, City, State, Zip Code); Business Phone Number; Email Address; License Number; License Status (Active Only); License Type; License Effective Date; License Expiration Date; Authorization Lines as specified above. Please send the requested data to me in Excel format to the email address provided.				

Request #	Division	Date/Time	Requestor	Company Name
W124679	LAH	9/12/2017 9:33:12 AM	WILLIAM LOVE	1971
Address [REDACTED]				
Email Address [REDACTED]				
Requested Information May I please have new agents that have AT LEAST a life producers license. Received after November 2016. They can have other lines however they have at least a producers license.				

Request #	Division	Date/Time	Requestor	Company Name
C126243	CPS	10/27/2017 2:30:17 PM	David Roundtree	
Address , , NJ				
Email Address save_achildinc@yahoo.com				
Requested Information				



Extract of OPRA Requestor Information

November 30, 2017

Page: 38 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

- 1, Record request is Complaint against Kimberly Williams reference to a lost application from the State Auto Insurance Plan
2. The Month Jan of 2013 to Feb of 2013
- 3 any record about the lost application, dealing with the complaint, the investigation of the complaint, the outcome of the case

Request #	Division	Date/Time	Requestor	Company Name
C126244	CPS	10/27/2017 2:34:51 PM	David Roundtree	
Address , , NJ				
Email Address save_achildinc@yahoo.com				
Requested Information 1, Record request is Complaint against Kimberly Williams reference to a lost application from the State Auto Insurance Plan 2. The Month March of 2013 to April of 2013 3 any record about the lost application, dealing with the complaint, the investigation of the complaint, the outcome of the case				

Request #	Division	Date/Time	Requestor	Company Name
C126245	CPS	10/27/2017 2:36:13 PM	David Roundtree	
Address , , NJ				
Email Address save_achildinc@yahoo.com				
Requested Information 1, Record request is Complaint against Kimberly Williams reference to a lost application from the State Auto Insurance Plan 2. The Month May of 2013 to June of 2013 3 any record about the lost application, dealing with the complaint, the investigation of the complaint, the outcome of the case				

Request #	Division	Date/Time	Requestor	Company Name
C126247	CPS	10/27/2017 2:38:19 PM	David Roundtree	
Address , , NJ				
Email Address save_achildinc@yahoo.com				
Requested Information , Record request is Complaint against Kimberly Williams reference to a lost application from the State Auto Insurance Plan 2. The Month July of 2013 to Aug of 2013 3 any record about the lost application, dealing with the complaint, the investigation of the complaint, the outcome of the case				

Request #	Division	Date/Time	Requestor	Company Name
C126249	CPS	10/27/2017 2:42:34 PM	David Roundtree	
Address , , NJ				
Email Address				



Extract of OPRA Requestor Information

November 30, 2017

Page: 39 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

save_achildinc@yahoo.com

Requested Information

- 1, Record request is Complaint against Kimberly Williams reference to a lost application from the State Auto Insurance Plan
2. The Month Nov of 2013 to Dec of 2013
- 3 any record about the lost application, dealing with the complaint, the investigation of the complaint, the outcome of the case

Request #	Division	Date/Time	Requestor	Company Name
C126250	CPS	10/27/2017 2:44:03 PM	David Roundtree	

Address

, , NJ

Email Address

save_achildinc@yahoo.com

Requested Information

- 1, Record request is Complaint against Kimberly Williams reference to a lost application from the State Auto Insurance Plan
2. The Month Nov of 2014 to Dec of 2014
- 3 any record about the lost application, dealing with the complaint, the investigation of the complaint, the outcome of the case

Request #	Division	Date/Time	Requestor	Company Name
C126251	CPS	10/27/2017 2:45:36 PM	David Roundtree	

Address

, , NJ

Email Address

save_achildinc@yahoo.com

Requested Information

- 1, Record request is Complaint against Kimberly Williams reference to a lost application from the State Auto Insurance Plan
2. The Month Sept of 2014 to Oct of 2014
- 3 any record about the lost application, dealing with the complaint, the investigation of the complaint, the outcome of the case

Request #	Division	Date/Time	Requestor	Company Name
W125743	LAH	10/12/2017 1:16:09 PM	Jacqueline Assuncao	The Assuncao Trust

Address

[REDACTED]

Email Address

[REDACTED]

Requested Information

I am requesting a copy of an Irrevocable Life Insurance Trust Agreement that was created on [REDACTED]. The trustees on the agreement are [REDACTED], [REDACTED] and [REDACTED]. The insured are [REDACTED] and [REDACTED]. Thank you.

Request #	Division	Date/Time	Requestor	Company Name
C126252	CPS	10/27/2017 2:47:06 PM	David Roundtree	



Extract of OPRA Requestor Information

November 30, 2017

Page: 40 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

Address

, , NJ

Email Address

save_achildinc@yahoo.com

Requested Information

- 1, Record request is Complaint against Kimberly Williams reference to a lost application from the State Auto Insurance Plan
2. The Month July of 2014 to Aug of 2014
- 3 any record about the lost application, dealing with the complaint, the investigation of the complaint, the outcome of the case

Request #	Division	Date/Time	Requestor	Company Name
C126253	CPS	10/27/2017 2:49:38 PM	David Roundtree	

Address

, , NJ

Email Address

save_achildinc@yahoo.com

Requested Information

- 1, Record request is Complaint against Kimberly Williams reference to a lost application from the State Auto Insurance Plan
2. The Month May of 2014 to June of 2014
- 3 any record about the lost application, dealing with the complaint, the investigation of the complaint, the outcome of the case

Request #	Division	Date/Time	Requestor	Company Name
C126254	CPS	10/27/2017 2:51:38 PM	David Roundtree	

Address

, , NJ

Email Address

save_achildinc@yahoo.com

Requested Information

- 1, Record request is Complaint against Kimberly Williams reference to a lost application from the State Auto Insurance Plan
2. The Month May of 2014 to June of 2014
- 3 any record about the lost application, dealing with the complaint, the investigation of the complaint, the outcome of the case

Request #	Division	Date/Time	Requestor	Company Name
C126255	CPS	10/27/2017 2:54:29 PM	David Roundtree	

Address

, , NJ

Email Address

save_achildinc@yahoo.com

Requested Information



Extract of OPRA Requestor Information

November 30, 2017

Page: 41 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

- 1, Record request is Complaint against Kimberly Williams reference to a lost application from the State Auto Insurance Plan
2. The Month March of 2014 to April of 2014
- 3 any record about the lost application, dealing with the complaint, the investigation of the complaint, the outcome of the case

Request #	Division	Date/Time	Requestor	Company Name
C126256	CPS	10/27/2017 2:56:15 PM	David Roundtree	
Address ,, NJ				
Email Address save_achildinc@yahoo.com				
Requested Information 1, Record request is Complaint against Kimberly Williams reference to a lost application from the State Auto Insurance Plan 2. The Month Jan of 2014 to Feb of 2014 3 any record about the lost application, dealing with the complaint, the investigation of the complaint, the outcome of the case				

Request #	Division	Date/Time	Requestor	Company Name
C126257	CPS	10/27/2017 2:57:59 PM	David Roundtree	
Address ,, NJ				
Email Address save_achildinc@yahoo.com				
Requested Information 1, Record request is Complaint against Kimberly Williams reference to a lost application from the State Auto Insurance Plan 2. The Month Jan of 2014 to Feb of 2014 3 any record about the lost application, dealing with the complaint, the investigation of the complaint, the outcome of the case				

Request #	Division	Date/Time	Requestor	Company Name
W123609	CPS	8/4/2017 3:41:43 PM	Lauren Vrana	Turke & Strauss LLP
Address 613 Williamson Street STE 209, Madison, NJ 53703				
Email Address laurenv@turkestrauss.com				
Requested Information Dear Public Records Officer: Please produce all consumer complaints regarding Wells Fargo Home Mortgage, Inc. and/or Wells Fargo Bank, N.A. Relevant complaints are limited to those related to residential home mortgages received on or after August 1, 2013. If possible, please produce the records electronically, via email to laurenv@turkestrauss.com or on a CD. We are willing to pay all reasonable costs associated with the production of records. Should you have any questions, please contact me immediately. Very Truly Yours, Lauren				

Request #	Division	Date/Time	Requestor	Company Name
W123616	CFI	8/4/2017 6:09:37 PM	Narayan Venugopal	
Address				



Extract of OPRA Requestor Information

November 30, 2017

Page: 42 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

Email Address

Requested Information

Can you please provide me information about companies licensed as Mortgage Lenders / Brokers Company : Mortgage Lenders & Mortgage Brokers Individuals: Mortgage Licensed individuals who act a loan officers, originators etc.I need in separate csv files for each category.

Request #	Division	Date/Time	Requestor	Company Name
W124032	LAH	8/18/2017 11:53:58 AM	Jennifer Sklar	SJ Health Insurance Advocates

Address

570 West Mt. Pleasant Avenue, Suite 204, Livingston, NJ 07039-0703

Email Address

js@sjhia.com

Requested Information

SJ Health Insurance Advocates is requesting the following information with regard to denied insurance claims that are appealed through the State of New Jersey Dept. Banking and Insurance. 1. How many appeals are filed each year? 2. What number or percentage of appeals are overturned in the member's favor? 3. How many IUROs does NJ Dept of Banking and Insurance contract with? 4. What are the names of the IUROs that NJ contracts with?

Request #	Division	Date/Time	Requestor	Company Name
W125003	CFI	9/21/2017 1:51:34 PM	Elizabeth Barnett	At Your Pace Online

Address

531 NE F ST, Grants Pass, NJ 97526-9752

Email Address

elizabeth@atyourpaceonline.com

Requested Information

I'm with At Your Pace Online. We are an approved continuing education provider for Real Estate Mortgage Loan Originators. We would like to request a list of all licensed Mortgage Loan Originators that includes full name, mailing address, license type, license number, date first licensed, license expiration, and email addresses. If there is anything else that I can do to facilitate this request please feel free to let me know. Once the request is complete please email the information to me at elizabeth@atyourpaceonline.com. Thank you, Elizabeth Barnett AYPO, LLC 531 NE F Street Grants Pass, OR 97526(541)237-6054 (Direct)

Request #	Division	Date/Time	Requestor	Company Name
C124344	LAH	8/29/2017 8:08:50 AM	Steven Sklaver	

Address

1901 Avenue of the Stars, Suite 950, Los Angeles, NJ 90067

Email Address

ssklaver@susmangodfrey.com

Requested Information

Just last week, Phoenix Life Insurance (a Nassau Re Company) and PHL Variable announced that was "adjusting the cost of insurance rates on certain Phoenix Accumulator Universal Life and Phoenix Estate Legacy policies." Pursuant to the state's open record laws, please send me all documents and correspondence regarding this COI increase. Thank you.

Request #	Division	Date/Time	Requestor	Company Name
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Extract of OPRA Requestor Information

November 30, 2017

Page: 43 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

W124330	REC	8/28/2017 4:16:41 PM	Jessica Parker	The Parker Group
---------	-----	----------------------	----------------	------------------

Address

1111 Markkress Rd, STE 201, Cherry Hill, NJ 08003-0800

Email Address

Jparkergroup@yahoo.com

Requested Information

To whom it may concern, we would like an updated new list of all the newly licensed real estate agents in NJ, that received their licenses since January of 2016 to current. We would like emails and phone number for copying. Please send as excel file. Thank you

Request #	Division	Date/Time	Requestor	Company Name
W126213	ADM	10/26/2017 4:25:30 PM	Yuri Chernov	

Address

[REDACTED]

Email Address

[REDACTED]

Requested Information

Copy of the License Application for: Company Name: TERRA ABSTRACT INC. NJ Reference #: 1084387 National Producer #: 2007326 Authority: Title Insurance

Request #	Division	Date/Time	Requestor	Company Name
C125640	REC	10/10/2017 2:47:22 PM	Madel Asistio	

Address

, , NJ

Email Address

MAsistio@cresinsurance.com

Requested Information

I would like to request a real estate roster including the following license types:

- ? Branch Office
- ? Broker of Record
- ? Broker/Salesperson
- ? Real Estate Company
- ? Referral Agent
- ? Salesperson

With the following statuses:

- ? Actively Licensed
- ? Suspended
- ? Revoked
- ? Surrendered
- ? Inactive

Request #	Division	Date/Time	Requestor	Company Name
W125123	PAC	9/26/2017 8:39:42 AM	Michele Cumberland	NJM Insurance Co

Address

301 Sullivan Way, West Trenton, NJ 08628



Extract of OPRA Requestor Information

November 30, 2017

Page: 44 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

Email Address

MCumberland@njm.com

Requested Information

Please send me the June 2017 Version of New Jersey DOBI - Private Passenger Auto Semi-Annual Reports In-Force Exposures by Company Sorted by Group list. Thank you.

Request #	Division	Date/Time	Requestor	Company Name
W125665	COM	10/10/2017 5:50:28 PM	Heidi Gootnick	Winget, Spadafora & Schwartzerg, LLP

Address

45 Broadway, 19th Floor, New York, NJ 10006

Email Address

gootnick.h@wssllp.com

Requested Information

The State of New Jersey Department of Banking and Insurance's entire non-confidential file related to ?Proceedings by the Commissioner of Banking and Insurance, State of New Jersey, to revoke, suspend, and/or fine the public adjuster licenses of Construction, Investigations, & Adjustments LLC, Reference No. 1593300 and Gene Mehmel, Reference No. 9969977, ? Order No. E17-31. We request copies of all responsive documents to be produced via electronic means if possible.

Request #	Division	Date/Time	Requestor	Company Name
W126968	ADM	11/18/2017 12:25:47 PM	Mary Mcelwee	Mcelwee & Quinn

Address

[REDACTED]

Email Address

[REDACTED]

Requested Information

I received a certified letter stating: Notification of Inactive Account Property ID Number: [REDACTED] Property Description: CK01Amount: [REDACTED] Dormant as of: 6/7/13Do you have any record of this - thank you!

Request #	Division	Date/Time	Requestor	Company Name
W123788	INS	8/10/2017 4:39:05 PM	Jacqueline L Crutcher	Thompson, Coe, Cousins & Irons, LLP

Address

650 Poydras St., Suite 2105, New Orleans, NJ 70130

Email Address

jcrutcher@thompsoncoe.com

Requested Information

Any and all written and/or electronically stored information you possess, control or have access to regarding any and all complaints and/or investigations against JOHN UHR from 2005 to present, including but not limited to, New Jersey Division of Insurance File No. [REDACTED]. This request includes but is not limited to all photographs, testimony and/or statements obtained along with any investigative reports prepared and any conclusions and findings based upon your investigations.

Request #	Division	Date/Time	Requestor	Company Name
W124167	AFC	8/23/2017 11:52:09 AM	henry moreira	

Address

[REDACTED]



Extract of OPRA Requestor Information

November 30, 2017

Page: 45 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

Email Address

[REDACTED]

Requested Information

Any settlement agreement, orders, fines or penalties with Geico Insurance and any allegations of wrongdoing or consumer fraud. thank you

Request #	Division	Date/Time	Requestor	Company Name
W124168	INS	8/23/2017 11:56:38 AM	henry moreira	

Address

[REDACTED]

Email Address

[REDACTED]

Requested Information

Any settlement agreement, orders, fines or penalties with Geico Insurance and any allegations of wrongdoing or consumer fraud. thank you

Request #	Division	Date/Time	Requestor	Company Name
C124435	ADM	8/31/2017 2:21:45 PM	Brianna Drake	Friedlander Associates, Inc.

Address

56 Payne Road, Suite 8-9, Lebanon, NJ 08803

Email Address

brianna@friedlanderinsurance.com

Requested Information

I am looking for a list of licensed individual NJ Mortgage Brokers. I would like, name, address, phone and email, and the name of business association. I understand that I will not be getting any PII. I am licensed NJ insurance agent, and I would like only the same information that someone would expect to see on my professional info.

Request #	Division	Date/Time	Requestor	Company Name
W125666	COM	10/10/2017 6:08:48 PM	Jackson T Horowitz	

Address

35 Progress Place, Voorhees, NJ 08043

Email Address

jthorowitz@claimsintl.com

Requested Information

I Jackson T. Horowitz hereby request the following from the Dept. of Banking and Insurance:1. A copy of the initial decision and supporting documents/exhibits (if any exist) of Commissioner V. Reh fuss, OAL Docket No. BKI 4198-02.2. A copy of the final agency decision and order and supporting documents/exhibits (if any exist) of Commissioner V. Reh fuss, OAL Docket No. BKI 4198-02.3. A copy of the initial decision and supporting documents/exhibits (if any exist) of Commissioner V. Nicolo, OAL Docket No. BKI 10722-04.4. A copy of the final agency decision and order and supporting documents/exhibits (if any exist) of Commissioner V. Nicolo, OAL Docket No. BKI 10722-04.Kindly furnish me a copy of requested items promptly and via email at my above email address. Sincerely, Jackson T. Horowitz

Request #	Division	Date/Time	Requestor	Company Name
C126511	REC	11/3/2017 3:07:27 PM	Madel Asistio	

Address



Extract of OPRA Requestor Information

November 30, 2017

Page: 46 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

, , NJ				
Email Address MAstio@cresinsurance.com				
Requested Information I would like to request a real estate roster including the following license types: ? Branch Office ? Broker of Record ? Broker/Salesperson ? Real Estate Company ? Referral Agent ? Salesperson With the following statuses: ? Actively Licensed ? Suspended ? Revoked ? Surrendered ? Inactive				
Request #	Division	Date/Time	Requestor	Company Name
W124033	LAH	8/18/2017 11:55:10 AM	Jennifer Sklar	SJ Health Insurance Advocates
Address 570 West Mt. Pleasant Avenue, Suite 204, Livingston, NJ 07039-0703				
Email Address js@sjhia.com				
Requested Information SJ Health Insurance Advocates is requesting the following information with regard to denied insurance claims that are appealed through the State of New Jersey Dept. Banking and Insurance. 1. How many appeals are filed each year?2. What number or percentage of appeals are overturned in the member's favor?3. How many IUROs does NJ Dept of Banking and Insurance contract with?4. What are the names of the IUROs that NJ contracts with?				
Request #	Division	Date/Time	Requestor	Company Name
W126754	INS	11/13/2017 10:25:16 AM	Jonathan L Roddenberry	Brennan Law Office PA
Address [REDACTED]				
Email Address lrodtenberry@gbb-law.com				
Requested Information All documents that were received from, sent to, or that relate to either Rocket Lawyer Incorporated, Legal Zoom Inc., or Avvo Inc., or any subsidiary of those three entities. For the purposes of this request ?documents? should include all applications, opinions, investigations, correspondence, orders, memorandums, emails, complaints, and responses thereto.				
Request #	Division	Date/Time	Requestor	Company Name
W125011	ADM	9/21/2017 3:07:36 PM	Lisa Chabak	
Address 3 AAA Drive, Suite 201, Robbinsville, NJ 08691				



Extract of OPRA Requestor Information

November 30, 2017

Page: 47 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

Email Address

Ichabak@firstam.com

Requested Information

Can you tell me the status of confirmation #W124904

Request #	Division	Date/Time	Requestor	Company Name
C123875	SOL	8/15/2017 8:13:10 AM	Randy Slone	Slone & Bates

Address

Email Address

slonebates@tgtel.com

Requested Information

Any record since January 1, 2014, reflecting the company's financial solvency, including revenue or premium dollars received, income statements or balance sheets.

Request #	Division	Date/Time	Requestor	Company Name
W125579	REC	10/7/2017 8:52:33 PM	Erik Brachman	

Address

Email Address

Requested Information

I would like all REC investigations and complaint resolutions, specifically fine amounts and/or letter of censure for 2017 violations for N.J.A.C. 11:5-3.9(c), for individuals and businesses failing to submit an Office Closing Affidavit within 30 days of office closure.

Request #	Division	Date/Time	Requestor	Company Name
W125677	PAC	10/11/2017 10:01:01 AM	Sarah Flanagan	Prizm, LLC

Address

1015 Briggs Road, Mount Laurel, NJ 08054

Email Address

sflanagan@prizmlc.com

Requested Information

I need the entire NJ DOBI Private Passenger Auto Semi-Annual Reports PIP Medical Expense Limit Report-Voluntary Market for June 2017. I need to see all pages including the limit by company, group and territory thanks

Request #	Division	Date/Time	Requestor	Company Name
C125792	CPS	10/13/2017 1:29:46 PM	Vipin Varghese	DeCotiis, Fitzpatrick, Cole & Giblin, LLP

Address

Glenpointe Centre West, 500 Frank W. Burr Boulevard, Teaneck, NJ 07666

Email Address

VVarghese@decotiislaw.com

Requested Information



Extract of OPRA Requestor Information

November 30, 2017

Page: 48 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

We are requesting the entire case file of the investigation performed by the New Jersey Department of Banking & Insurance, Bureau of Fraud Deterrence, of American Asphalt, located at 100 Main Street West, Collingswood Heights, NJ 08059, with an EIN of [REDACTED]

Request #	Division	Date/Time	Requestor	Company Name
W125418	REC	10/3/2017 1:10:50 PM	Noelle Frieson	Alexander Anderson Real Estate Group
Address 14 Bergen Street, Hackensack, NJ 07601				
Email Address nfrieson@alexander-anderson.com				
Requested Information We would like a list of licensed Real Estate Instructors in the state of New Jersey. If possible with full contact information, or as much contact information as you have.				

Request #	Division	Date/Time	Requestor	Company Name
W126354	LAH	10/31/2017 3:14:59 PM	Nick Iannitelli	
Address 250 Pehle Ave, Saddle Brook, NJ 07663				
Email Address niannitelli@ft.newyorklife.com				
Requested Information Please send me all Life and Health newly licensed candidates from 9/19/17 to present. Please include all contact information. Thanks				

Request #	Division	Date/Time	Requestor	Company Name
W126662	CPS	11/8/2017 2:47:16 PM	John B Kearney	Kearney, Burns & Martone, P.C.
Address 210 White Horse pike, Haddon Heights, NJ 08035				
Email Address jk@nj-law.com				
Requested Information Requesting any and all documents concerning any investigation of or complaint against F. Boyle Adjustment Services, Corporate Claims Group and/or Frank Boyle filed within the last five (5) years. Resume and/or CV for Natalie M. MintchuwarnarResume and/or CV for Eugene Shannon				

Request #	Division	Date/Time	Requestor	Company Name
C126281	CPS	10/30/2017 8:14:06 AM	Nicole Rizzo	
Address , , NJ				
Email Address nrizzo@verticalscreen.com				
Requested Information				



Extract of OPRA Requestor Information

November 30, 2017

Page: 49 of 49

DEPARTMENT=Banking and Insurance, DIVISION=All, FROM 8/1/2017 To 11/20/2017,

I am doing a background check for employment purposes, and the name that I am researching came up as having an action against them from the NEW JERSEY DEPARTMENT OF INSURANCE. I need to verify if this person is the same as the one that I am researching. The subject's name that I am researching is DOUGLAS SMITH. Unfortunately, I am unable to provide any personal information in the same email that the subject's name is listed so I will be sending an email following this one with the DOB and PARTIAL SSN. If you have any questions or need more information please let me know.

Action info is as follows:

4/4/2013 ? Case E13-32 - Fine of \$1,500.

Respondent improperly signed a suitability acknowledgment form and falsely certified that he had met with an applicant, verified her identity and delivery the annuity.

FOLLOW- UP: SSN: [REDACTED] DOB: [REDACTED]

Total Requests = 182