



October 5, 2020

**SENT VIA FIRST CLASS AND CERTIFIED MAIL**

Daniel Copeland Jr.  
2231 E Camelback Rd., Ste 300  
Phoenix, AZ 85016-3447

7015 1520 0003 3179 8123

RE: Application for Insurance Producer License

Dear Mr. Copeland,

This letter is to notify you that your application for licensure as a nonresident insurance producer in South Dakota has been denied. The reason for the denial is as follows:

On June 8, 2020, You submitted to the South Dakota Division of Insurance (“Division”) an application for the reinstatement of your individual nonresident insurance producer license that expired on August 17, 2019. You answered “yes” to question 1B of the licensing application asking if you had ever been convicted of a felony offense. You also answered “yes” to question 2 of the licensing application asking if you had ever been the subject of an administrative proceeding. “NA” was answered to uploading relevant documentation. The Division conducted an investigation that revealed you pled guilty to a third offense felony DUI in Polk County, Iowa on March 13, 1996. The Division’s investigation also revealed 2019 administrative actions taken against you in Indiana, North Carolina, and Washington. The Indiana action involved the failure to pay a \$250.00 fine imposed for failing to report criminal history. The North Carolina action involved the surrender of your insurance license for failure to report another state’s administrative action. The Washington action involved a license revocation for failure to respond, failure to report another state’s action, and being subject to another state’s action.

The Division contacted you on June 10, 2020 at the mailing and email addresses you provided requesting documentation on the administrative actions, a written explanation as to why you provided incorrect, misleading, incomplete, or materially untrue information on your license application, and an explanation as to why you believe your South Dakota license should be reinstated. The Division’s letter was returned on July 2, 2020 as not deliverable as addressed. On July 13, 2020, the Division sent another letter via regular and certified mail to your provided mailing address and another email to the provided email address to again ask for documentation and written explanations. The Division also requested you update your residential address and advised that failing to respond is a violation of South Dakota law. These letters were returned on July 22, 2020 as “not known at this address.” On July 13, 2020, the Division attempted to contact you multiple times by phone at the number you provided, but each time received an automated message stating you are not available to take calls. To this date, the Division has not received a response.

Based on the above information, your application is denied under SDCL § 58-30-167(1), (2), (3), (6), (8), and (9) for providing incorrect, misleading, incomplete, or materially untrue information on your license application, violating the insurance laws of another state, attempting to obtain a license through misrepresentation, having been convicted of a felony, demonstrating incompetence or untrustworthiness in the conduct of business in this state or elsewhere, and for having your license revoked or denied in another state.



Please note that this denial is considered an administrative action which will be reported to the database maintained by the National Association of Insurance Commissioners. If an administrative action occurs, an insurance producer may be required to report the action to any and all states in which an insurance license is held and in accordance with the timeframes and requirements of each state.

Pursuant to SDCL § 58-30-168, you may make a written request to the Division of Insurance within thirty (30) days of the date of this denial for a hearing to determine the reasonableness of this decision to deny your application for licensure.

Sincerely,

*Maggie Dell*

Maggie Dell, Assistant Director  
South Dakota Division of Insurance  
Department of Labor and Regulation

Cc: [daniel.copeland@healthiq.com](mailto:daniel.copeland@healthiq.com)

Cc: Daniel Copeland Jr.  
11620 E Sahuaro Dr. Apt. 2107  
Scottsdale, AZ 85259-3173

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
Certified Mail Fee	Postmark Here
\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$	
<input type="checkbox"/> Return Receipt (electronic) \$	
<input type="checkbox"/> Certified Mail Restricted Delivery \$	
<input type="checkbox"/> Adult Signature Required \$	
<input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage	
\$	
Total Postage and Fees	
\$	
Sent To	
Street and Apt. No., or PO Box No.	
City, State, ZIP+4®	
PS Form 3800, April 2015 PSN 7530-02-000-8047 See Reverse for Instructions	

7015 1520 0003 3179 8123