

**STATE OF NEW HAMPSHIRE  
INSURANCE DEPARTMENT**

**In Re: Christopher Varraso  
Docket No.: Ins. No. 22-031-EP**

**ORDER TO SHOW CAUSE  
AND  
NOTICE OF HEARING**

The New Hampshire Insurance Department ("NHID") orders Christopher Varraso ("Respondent") to show cause why the New Hampshire Insurance Commissioner should not suspend or revoke his New Hampshire insurance adjuster license and/or levy an administrative fine. In support of the Order to Show Cause and pursuant to RSA 541-A:31, RSA 400-A:17 *et seq.* and Ins Chapter 200, the NHID states as follows:

**STATEMENT OF FACTS**

1. Respondent is a Massachusetts domiciled insurance adjuster who is licensed in the following lines of authority: property & casualty (excluding workers' compensation).
2. On or about January 13, 2022, Respondent submitted an application for NH licensure; in that application Respondent answered "No" to question 1B inquiring about felony convictions.
3. However, though he did not disclose it in his application, in 2016 Respondent plead guilty to the felony of breaking and entering a building at night.
4. In that same application, Respondent answered "No" to question 2 inquiring about prior administrative actions.
5. However, though he did not disclose it in his application, Respondent entered into a consent agreement with the state of Florida on or about January 7, 2022.
6. Furthermore, on or about February 25, 2022, Florida suspended Respondent's Florida adjuster license for failing to pay the penalty assessed in the consent order referenced above.
7. On April 1, 2022, pursuant to NH RSA 400-A:16, the NHID requested that Respondent provide a written narrative regarding his failure to report the felony

conviction and administrative action. Respondent did not respond to that request in the time frame allowed by statute.

8. On April 18, 2022, pursuant to NH RSA 400-A:16, the NHID made a second request that Respondent provide a written narrative regarding his failure to report the felony conviction and administrative action. Respondent did not respond to that request in the time frame allowed by statute.
9. On May 9, 2022, the NHID inquired with Respondent's employer regarding his employment status. Four days later, on May 13, 2022, Respondent finally acknowledged the NHID's earlier requests and indicated he would provide the requested documentation the next week. Respondent failed to do so.
10. On May 17, 2022, the NHID made yet another request for outstanding information from Respondent; he yet again indicated he would provide the requested information, but failed to do so.

#### **STATEMENT OF ISSUES**

11. Whether Respondent violated NH RSA 402-B:12 by:
  - a. providing incorrect misleading, incomplete, or materially untrue information in the license application when he failed to disclose his felony conviction;
  - b. by providing incorrect misleading, incomplete, or materially untrue information in the license application when he failed to disclose the administrative action in Florida;
  - c. by having been convicted of a felony;
  - d. by violating any order of another state's insurance commissioner when he failed to pay the administrative fine set forth in the consent order with the state of Florida; and
  - e. by having his adjuster license suspended in Florida.
12. Whether the Respondent violated NH RSA 400-A:16, II on at least two occasions for failing to respond to the NHID's inquiry regarding these matters.
13. The NHID reserves the right to amend this statement of issues upon reasonable notice to the Commissioner (or his designated Representative) and the Respondent.

#### **INSURANCE LAWS VIOLATED BY RESPONDENT**

14. The NHID maintains the Respondent violated the following New Hampshire insurance law statutes: NH RSA 402-B:12 and NH RSA 400-A:16, II.

15. The NHID reserves the right to amend this list of insurance laws violated by the Respondent upon reasonable notice to the Commissioner (or his designated Representative) and the Respondent.

#### **PENALTY REQUESTED**

16. In the event that the Hearing Officer determines after an evidentiary hearing that the NHID sustained its burden of proof with respect to the allegations of fact and violations of law outlined above, the NHID requests that the Hearing Officer impose the following sanctions on the Respondent:
- a. Order revocation or suspension of Respondent's New Hampshire insurance adjuster license; and
  - b. Order Respondent to pay a fine in an amount not to exceed \$2,500 per violation.

#### **NOTICE OF HEARING**

17. An adjudicatory proceeding shall be commenced for the purpose of resolving the issues articulated above pursuant to RSA 541-A:31, RSA 400-A:17:6, *et seq.*, and Ins 200. To the extent that the Department's rules do not address an issue of policy or procedures, the Department shall apply the N.H. Department of Justice Rules, Part 800.
18. The Respondent shall appear at Department on **July 28 at 1 PM** at the Department's office located at 21 South Fruit Street, Suite 14, in Concord New Hampshire to participate in this adjudicatory proceeding and, if deemed appropriate, be subject to sanctions pursuant to RSA 402-B:12 and RSA 400-A:15, III. Respondent's failure to appear at the time and place specified above may result in the hearing being held *in absentia* pursuant to RSA 400-A:19, VII, and sanctions may be imposed without further notice or an opportunity to be heard.
19. Steve Notinger, Esq. is appointed to act as Hearing Officer in this matter with all the authority within the scope of RSA 400-A:19 and Ins 203.01.
20. Sandra Barlow shall serve as clerk to the Hearing Officer. The parties should direct all communications to Ms. Barlow, whose contact information is:

Sandra Barlow, Clerk  
New Hampshire Insurance Department  
21 South Fruit Street, Suite 14  
Concord, NH 03301

Tel: (603) 271-2033  
Fax: (603)271-1406  
Email: [sandra.l.barlow@ins.nh.gov](mailto:sandra.l.barlow@ins.nh.gov)

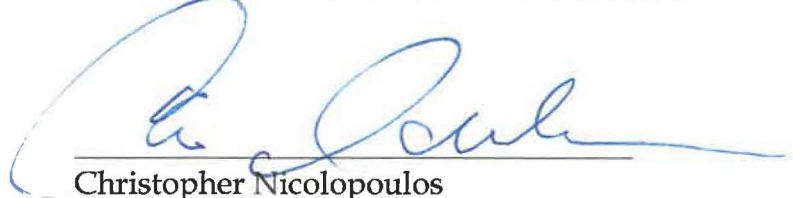
21. The Respondent has the right to be represented by a lawyer in this proceeding. However, the Respondent shall bear the cost of retaining said lawyer. Should the Respondent elect to retain a lawyer, his lawyer shall file a Notice of Appearance with Ms. Barlow, and said lawyer should do so at the earliest possible date. A copy of the NHID's Notice of Appearance form is enclosed with this Order.
22. Any party may request a transcript of the proceeding. The party requesting a transcript of the proceedings shall file a written request for a certified court reporter with the Hearing Officer at least 10 days prior to the scheduled hearing date. The costs incurred for the services of a certified court reporter shall be borne by the requesting party.
23. Joshua Hilliard, Esq. shall serve as staff advocate representing the interests of the NHID.
24. All routine procedural inquiries may be made by contacting Sandra Barlow, Hearing Clerk, New Hampshire Insurance Department, 21 South Fruit Street, Suite 14, Concord NH 03301, (603) 271-2033, but that all other communications with the Hearing Officer and the Commissioner shall be in writing and filed as provided above. *Ex parte* communications are forbidden by statute and the Department's rules.
25. A copy of this hearing notice shall be served upon Respondent by certified mail addressed to the mailing address on file with New Hampshire Insurance Department. *See*, RSA 400-A:14.

It is **SO ORDERED**.

NEW HAMPSHIRE INSURANCE DEPARTMENT

Date:

6/2/22



Christopher Nicolopoulos  
Insurance Commissioner

**CERTIFICATE OF SERVICE**

The undersigned hereby certifies that a true and accurate copy of the foregoing Order to Show Cause and Notice of Hearing was sent this date by first-class mail, postage prepaid, and by certified mail, return receipt requested, to 550 Washington St, Apt. 101, Braintree, MA 02184-5622 and christopher.varraso@libertymutual.com, the mail and e-mail addresses the Respondent maintains on file with the Department.

Date: 6/2/22

  
\_\_\_\_\_  
Joshua S. Hilliard, Esq.  
Compliance & Enforcement Counsel

NEW HAMPSHIRE INSURANCE DEPARTMENT

ATTORNEY APPEARANCE or WITHDRAWAL

Docket No. (if known): \_\_\_\_\_

Respondent Name or Case Name: \_\_\_\_\_

☐ APPEARANCE

Please **ENTER** my appearance as  
Counsel for \_\_\_\_\_

☐ I confirm that neither I nor any member of my  
law firm have been retained by the Department  
of Insurance or the Commissioner of Insurance.

☐ WITHDRAWAL

Please **WITHDRAW** my appearance as  
Counsel for \_\_\_\_\_

☐ Notice of Withdrawal sent to my client on:  
\_\_\_\_\_ at the following address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby certify that I provided a copy of this original request to the Department and a copy to all other  
known parties to this matter in accordance with Ins 204.09.

Signed: \_\_\_\_\_

Name: \_\_\_\_\_ NH Bar #: \_\_\_\_\_

Firm Name: \_\_\_\_\_ Email: (see also below) \_\_\_\_\_

Physical Address: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Phone: \_\_\_\_\_

**Email Consent:** ☐ By checking this box, I consent to delivery by email in accordance with Ins 204.09(c).  
Please send communications and documents to the above email address.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

*If you do not consent to delivery by email, all communications will be sent to you by personal delivery  
at your physical address or by United States Postal Service first class mail to your mailing address.*