



**The State of New Hampshire  
Insurance Department**

21 South Fruit Street, Suite 14  
Concord, NH 03301  
(603) 271-2261 Fax (603) 271-1406  
TDD Access: Relay NH 1-800-735-2964

**Christopher R. Nicolopoulos**  
Commissioner

**David J. Bettencourt**  
Deputy Commissioner

February 1, 2022

*VIA FIRST-CLASS & CERTIFIED MAIL: 7011 2000 0001 8842 7131*  
Omega Vehicle Services, LLC d/b/a Delta Auto Protect  
600 Eagleview Blvd, Suite 300  
Exton, PA 19341

*VIA FIRST-CLASS & CERTIFIED MAIL: 7011 2000 0001 8842 7124*  
Omega Vehicle Services, LLC d/b/a Delta Auto Protect  
1800 John F. Kennedy Blvd, #300  
Philadelphia, PA 19103

*VIA FIRST-CLASS & CERTIFIED MAIL: 7011 2000 0001 8842 7117*  
Omega Vehicle Services, LLC d/b/a Delta Auto Protect  
1735 Market Street, Suite 3750  
Philadelphia PA 19103

Re: Order to Show Cause & Notice of Hearing, Docket No.: INS No. 22-004-EP

Dear Omega Vehicle Services, LLC d/b/a Delta Auto Protect:

Enclosed please find an Order to Show Cause and Notice of Hearing issued by Commissioner Christopher Nicolopoulos.

A hearing in this matter has been scheduled on **March 8, 2022 at 1 PM** at the New Hampshire Insurance Department located at 21 South Fruit Street, Suite 14, Concord, NH. You may find directions and additional information on our website at <http://www.nh.gov/insurance>.

Sincerely,

A handwritten signature in black ink, appearing to read "J. Hilliard", written over a white background.

**Joshua S. Hilliard, Esq.**  
Compliance and Enforcement Counsel

**STATE OF NEW HAMPSHIRE  
INSURANCE DEPARTMENT**

**In Re: Omega Vehicle Services, LLC, d/b/a Delta Auto Protect  
Docket No.: Ins. No. 22-004-EP**

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

The New Hampshire Insurance Department ("NHID") orders Omega Vehicle Services, LLC d/b/a Delta Auto Protect ("Respondent") to show cause why the New Hampshire Insurance Commissioner should not levy an administrative fine against it, order it to pay restitution to NH consumers, and/or order Respondent to cease and desist from offering consumer guaranty contracts in the state. 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 limited liability company organized in the State of Pennsylvania, and offers consumer guaranty contracts in New Hampshire.
2. Respondent is not and has never been registered as an obligor in the State of New Hampshire, and is not authorized to provide service guaranty contracts to consumers in New Hampshire.
3. On or about September 3, 2019 New Hampshire consumer S.S. purchased a service guaranty contract from Respondent to cover her 2013 Volkswagen Jetta. The term of the contract ran for 5 years/200,000 additional miles.
4. On or about September 29, 2021, S.S. began experiencing issues with her Jetta's blower motor, and filed a claim with Respondent.
5. On or about October 15, 2021, S.S. uploaded her Jetta's service records to Respondent's website.
6. Since that time, S.S. has called, e-mailed, and used Respondent's "send a note" feature on its customer portal on numerous occasions, but has never received a response regarding her outstanding claim.
7. On December 28, 2021, pursuant to NH RSA 400-A:16, II the NHID requested that Respondent provide information related to its failure to register with the

State, copies of all contracts it offered in New Hampshire, and other information related to its operations in New Hampshire.

8. Respondent failed to respond to that December 28, 2021 request.
9. On January 14, 2022 pursuant to NH RSA 400-A:16, II the NHID requested that Respondent provide information related to its failure to register with the State, copies of all contracts it offered in New Hampshire, and other information related to its operations in New Hampshire.
10. Respondent failed to respond to that January 14, 2022 request.

#### STATEMENT OF ISSUES

11. Whether the Respondent violated NH RSA 415-C:3, I (a) by failing to register with the Commissioner while offering, administering, selling, soliciting, negotiating, or acting under a consumer guaranty contract in New Hampshire.
12. Whether Respondent violated NH RSA 415-C:4 by failing to provide proof of financial responsibility to the NHID.
13. Whether the Respondent violated NH RSA 415-C:7, I (f) by failing to act promptly upon communications with respect to claims arising under a consumer guaranty contract.
14. Whether Respondent violated NH RSA 415-C:7, II (a) by making, permitting, or causing the practice that resulted in failure to perform the services promised under the contract in a timely, competent, or workmanlike manner.
15. Whether Respondent violated NH RSA 400-A:16, II by failing to provide to the NHID within 10 working days the information requested on December 28, 2021 and January 14, 2022.
16. 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

17. The NHID maintains the Respondent violated the following New Hampshire insurance law statutes: NH RSA 415-C:3, I (a), NH RSA 415-C:4, NH RSA 415-C:7, I (f), NH RSA 415-C:7, II (a), and NH RSA 400-A:16, II.

18. 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

19. 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 the Respondent to cease and desist from further consumer guaranty contract operations in New Hampshire;
- b. Order the Respondent to pay a penalty in an amount not to exceed \$1,000 per violation of NH RSA 415-C;
- c. Order the Respondent to pay a penalty in an amount not to exceed \$10,000 for each violation that is willful per violation of NH RSA 415-C;
- d. Order the Respondent to pay a penalty in an amount not to exceed \$2,500 per violation of NH RSA 400-A:16; and
- e. Order the Respondent to make restitution to consumer S.S.

20. The NHID reserves the right to amend penalty requested upon reasonable notice to the Commissioner (or his designated Representative) and the Respondent.

#### NOTICE OF HEARING

21. 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, *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.

22. The Respondent shall appear at Department on **March 8, 2022 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 415-C:10 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* and sanctions may be imposed without further notice or an opportunity to be heard.

23. 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.
24. Linda Zalinskie shall serve as clerk to the Hearing Officer. The parties should direct all communications to Ms. Zalinskie, whose contact information is:

Linda Zalinskie, Clerk  
New Hampshire Insurance Department  
21 South Fruit Street, Suite 14  
Concord, NH 03301  
Tel: (603) 271-2261  
Fax: (603)271-1406  
Email: linda.m.zalinskie@ins.nh.gov

25. 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. Zalinskie, 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.
26. 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.
27. Joshua Hilliard, Esq. shall serve as staff advocate representing the interests of the NHID.
28. All routine procedural inquiries may be made by contacting Linda Zalinskie, Hearing Clerk, New Hampshire Insurance Department, 21 South Fruit Street, Suite 14, Concord NH 03301, (603) 271-2261, 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 regulations.

29. 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

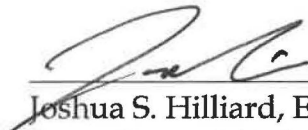
Date: 2-1-2022

  
\_\_\_\_\_  
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 Omega Vehicle Services, LLC d/b/a Delta Auto Protect, at 600 Eagleview Blvd, Suite 300 Exton, PA 19341; 1800 John F. Kennedy Blvd, #300, Philadelphia, PA 19103; and 1735 Market Street, Suite 3750 Philadelphia PA 19103.

Date: 2/1/22

  
\_\_\_\_\_  
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**

**WITHDRAWAL**

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

Please **WITHDRAW** 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.

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.***