

In the Matter of the
FINANCIAL INSTITUTIONS ACT, RSBC 1996, c.141
(the “Act”)

and the
INSURANCE COUNCIL OF BRITISH COLUMBIA
 (“Council”)

and
PAVITAR (PETER) SINGH BAGRY
(the “Licensee”)

ORDER

As Council made an intended decision on January 28, 2025, pursuant to sections 231, 236, and 241.1 of the Act; and

As Council, in accordance with section 237 of the Act, provided the Licensee with written reasons and notice of the intended decision dated February 20, 2025; and

As the Licensee requested a hearing on March 21, 2025, in accordance with section 237 of the Act; and

As the Licensee confirmed on May 11, 2025 that he wished to withdraw his request for a hearing;

Under authority of sections 231, 236, and 241.1 of the Act, Council orders that:

- 1) The Licensee’s general insurance licence is suspended for a period of one year, commencing on May 22, 2025 and ending at midnight on May 21, 2026;
- 2) The Licensee is fined \$2,500, to be paid by November 18, 2025;
- 3) The Licensee is required to complete the following courses, or equivalent courses as approved by Council, by August 20, 2025:
 - a. the Council Rules Course for General Insurance Agents, Salespersons and Adjusters;
and
 - b. the Ethics and the Insurance Professional course, available through the Insurance Institute of Canada;

(collectively, the “Courses”)

- 4) The Licensee is assessed Council's investigation costs of \$1,277.50, to be paid by November 18, 2025; and
- 5) A condition is imposed on the Licensee's general insurance licence that failure to complete the Courses and to pay the fine and investigation costs in full by their deadlines will result in the continued suspension of the Licensee's licence, and the Licensee will not be permitted to complete his 2027 annual licence renewal until such time as the Licensee has complied with the conditions listed herein.

This order takes effect on the **22nd day of May, 2025.**



Janet Sinclair, Executive Director
Insurance Council of British Columbia

INTENDED DECISION

of the

INSURANCE COUNCIL OF BRITISH COLUMBIA

(“Council”)

respecting

PAVITAR (PETER) SINGH BAGRY

(the “Licensee”)

1. Pursuant to section 232 of the *Financial Institutions Act* (the “Act”), Council conducted an investigation to determine whether the Licensee had acted in compliance with the requirements of the Act, Council Rules, and Code of Conduct, in regard to a fraudulent motor vehicle insurance claim that he had submitted following a vehicle collision. Additional issues identified in the course of the investigation were that the Licensee had conducted a series of vehicle insurance transactions for a vehicle that he was the principal operator of, and that he had failed to notify Council of a criminal charge.
2. On October 16, 2024, as part of Council’s investigation, a Review Committee (the “Committee”) comprised of Council members met via video conference to discuss the investigation. The Licensee attended the meeting for an interview with the Committee. An investigation report prepared by Council staff was distributed to the Licensee and Committee prior to the meeting. Having reviewed the investigation materials and discussed the investigation, the Committee prepared a report for Council.
3. The Committee’s report, along with the aforementioned investigation report, was reviewed by Council at its January 28, 2025 meeting, where it was determined the matter should be disposed of in the manner set out below.

PROCESS

4. Pursuant to section 237 of the Act, Council must provide written notice to the Licensee of the action it intends to take under sections 231, 236, and 241.1 of the Act before taking any such action. The Licensee may then accept Council’s decision or request a formal hearing. This intended decision operates as written notice of the action Council intends to take against the Licensee.

FACTS

5. The Licensee has been licensed with Council as a general insurance salesperson (“Level 1 Salesperson”) since 2013. He was authorized to represent an agency (the “Agency”) during the

material time period, and is still authorized to represent the Agency as of the date of this Intended Decision.

6. In October 2023, Council was notified by the Agency that the Insurance Corporation of British Columbia (“ICBC”) had conducted an investigation into the Licensee following a vehicle collision and subsequent claim report that occurred in May 2023. In addition to finding that the Licensee provided misleading claim information, ICBC also concluded that the Licensee had conducted multiple insurance transactions for a vehicle of which he was the primary driver, which is contrary to ICBC’s policies.
7. Insurance for the Licensee’s father’s vehicle (the “Vehicle”), for which the Licensee was the principal driver, lapsed in April 2023.
8. On May 19, 2023, while driving the Vehicle, the Licensee was involved in an accident. Following the collision, the Licensee called colleagues at the Agency to ask about the status of the Vehicle’s insurance. The Licensee proceeded to renew the Vehicle’s policy and also reduced the collision deductible from \$2,500 to \$300.
9. Also on May 19, 2023, the other involved driver reported the incident to ICBC, giving the date and time of loss as May 19, 2023, at 3:30 p.m.
10. On May 23, 2023, the Licensee called ICBC to report a claim, alleging that the date and time of the loss was May 19, 2023, at 5:45 p.m. (approximately half an hour after the Vehicle’s insurance had been renewed and the collision deductible lowered).
11. On July 4, 2023, the Licensee spoke to an ICBC adjuster and stated that he had renewed the Vehicle’s insurance after the collision.
12. On July 21, 2023, an ICBC Special Investigation Unit officer took a phone statement from the Licensee. The Licensee reiterated that he had insured the vehicle after the collision.
13. During its investigation, it also came to ICBC’s attention that the Licensee had processed 15 out of 17 insurance transactions relating to the Vehicle, for which he was principal driver. It is against ICBC policy to do so.
14. ICBC suspended the Licensee from conducting Autoplan transactions for 180 days, and he was required to pay \$4,505 for the damage to the other vehicle prior to being reinstated. ICBC also required the Licensee to complete their security and privacy course, within seven days of being reinstated.
15. Council’s investigator discovered, in the course of the investigation, that the Licensee had been criminally charged with assault in September 2023. He had not notified Council of the charge, contrary to Council Rule 7(3)(a)(iv). When asked about the charge, the Licensee stated that he was not aware of

the requirement to notify Council of criminal charges and said that he had not been charged with any offences before or since.

16. The Licensee was forthright in his statements to the Committee. He confirmed that he had renewed the Vehicle's insurance on the day of the accident, although he could not recall whether he had done so in person or via a telephone call. The Committee asked the Licensee about the fact that, in addition to renewing the Vehicle's insurance, he had also reduced the collision deductible. The Licensee did not deny doing so, but stated that he could not remember doing it.
17. When asked about whether he had yet completed ICBC's information security and privacy course (required to be completed within seven days of his being reinstated by ICBC), the Licensee explained that he was dealing with personal matters that had prevented him from doing the course yet. He was also asked whether he had yet paid for the damages done to the other vehicle, as required by ICBC; the Licensee explained that he will likely need to arrange a payment schedule with ICBC, and that he will "definitely make arrangements to pay."
18. The Committee asked the Licensee about the 15 insurance transactions he had completed for the Vehicle, despite being the principal driver. He told the Committee that he had not known that such transactions were prohibited by ICBC, and admitted to having done them.

ANALYSIS

19. Council appreciated that the Licensee provided forthright answers throughout the investigation. Nevertheless, his actions in the wake of the May 19, 2023, collision raise significant ethical concerns, and, in Council's opinion, amount to breaches of sections 3 ("Trustworthiness"), 4 ("Good Faith") and section 8 ("Usual Practice: Dealing with Insurers) of the Code of Conduct. Additionally, the Licensee's failure to notify Council of a criminal charge was a breach of Council Rule 7(3)(a)(iv), which requires that Council be notified within five business days if a licensee is "charged or convicted of any criminal offence or any offence under any law of any jurisdiction, excluding traffic offences resulting in monetary fines only."
20. Section 3 of the Code of Conduct states that "improper use of your position or knowledge as a licensee for personal benefit," "intentionally misleading clients, insurers or Council through false statements or by withholding material information," and "conduct in the nature of theft or fraud" are all examples of conduct that would reflect adversely on a Licensee's trustworthiness. Council believes that each of these examples applies to the Licensee's conduct, in attempting to mislead ICBC about the date and time of the collision, and in reducing his collision deductible.
21. Similarly, section 4 states that licensees "owe a duty of good faith to insurers," and cites "misrepresentation or failure to disclose material information where required" as an example of a breach of the good faith requirement. Section 8 also dictates that licensees "have a duty to insurers" to "provide full and accurate information." Both of these sections were breached, in Council's opinion, by the Licensee's attempt to benefit himself by deceiving ICBC. The Licensee's practice of completing

transactions for the Vehicle, of which he was principal driver, contrary to ICBC's policies, also contributes to breaches of sections 4 and 8.

PRECEDENTS

22. Prior to making its decision, Council took into consideration several past decisions of Council that involved licensees who made fraudulent or misleading claims on their own policies.
23. [Rilanne Simone Pardy](#) (March 2024): concerned a Level 2 general insurance agent ("Level 2 Agent") who was the subject of a disciplinary decision released by the Alberta Insurance Council (the "AIC") in July 2023. The AIC had found that the licensee submitted a fraudulent automobile claim on her own policy, specifically by providing false information about who was driving the vehicle at the time of the incident. The AIC revoked her licensure for one year and required her to pay a penalty of \$5,000. The licensee failed to notify Council of the AIC discipline. Council took the AIC's discipline into account when determining what action was appropriate. Council suspended the licensee's licence until such time as her Alberta suspension had passed, and she has otherwise shown completion of the Albertan disciplinary terms. She was also required to complete the Council Rules Course and assessed investigation costs.
24. [Jaspreet Jason Singh Minhas](#) and [Jasbir \(Jessie\) Singh Minhas](#) (March 2023): concerned a father and son who were both licensees. The father, Jasbir, was a Level 2 Agent, while the son, Jaspreet, was a Level 1 Salesperson. Jaspreet was a driver involved in a collision and misled both ICBC and law enforcement about who was driving the vehicle. Jasbir also misled ICBC and law enforcement, falsely alleging that he, rather than Jaspreet, had been driving the vehicle. Jaspreet was suspended for nine months, was made ineligible to upgrade to Level 2 for one year following the suspension, and was required to take an ethics course as well as the Council Rules Course. Jasbir was suspended for one year, had his licence downgraded to Level 1 for a year following the suspension, and was required to take the Council Rules Course, an ethics course, and a course for nominees. Both were also assessed investigation costs.
25. [Harpal Kaur Sandhu](#) (August 2022): concerned a life and accident and sickness insurance agent ("Life Agent") who made three fraudulent claims for total disability on her own policies. Council ordered that her licence be suspended for one year, fined her \$5,000, required her to complete the Council Rules Course, and assessed investigation costs.
26. [Paramjeet Kaur Johal](#) (June 2022): concerned a life agent who made fraudulent disability claims on her own policies. Council ordered that the licensee's licence be suspended for one year, fined her \$5,000, required her to complete the Council Rules Course, and assessed investigation costs.
27. [Martin Hroch](#) (February 2020): concerned a former Level 1 Salesperson who submitted at least 76 fraudulent insurance claims through his agency's employee health and wellness program. The amount claimed in each instance ranged from \$25 to \$75, leading to a total of \$3,045 received fraudulently. Council ordered that no application for a licence would be considered by the former licensee for five years, fined him \$5,000 and assessed investigation costs.

28. Council considered the [Pardy](#) and [Minhas](#) precedents to be the most helpful, as they dealt with licensees who had misled insurers concerning their own claims following automobile accidents. The other precedents involved licensees who repeatedly made fraudulent claims, and therefore less closely matched the facts of the case at hand.

MITIGATING AND AGGRAVATING FACTORS

29. Council also took mitigating and aggravating factors into consideration. The most notable mitigating factors were that the Licensee was cooperative during the investigation, expressed remorse that Council considered to be sincere, and has already faced consequences for the misconduct in question, as he was sanctioned by ICBC. The most significant aggravating factor, on the other hand, was that the Licensee had a significant amount of experience in the insurance industry, having been licensed for over a decade, and as such should have known better. Overall, the mitigating factors influenced Council towards fining the Licensee a lower amount than otherwise might have been the case.

CONCLUSION

30. Council believes it is appropriate to suspend the Licensee's licence for a one-year period, fine him \$2,500, and require him to complete the following courses:
- a) The Council Rules Course for General Insurance Agents, Salespersons and Adjusters;
 - b) The Insurance Institute's "Ethics and the Insurance Professional" course.
31. Council's opinion is that the Licensee's misconduct – chiefly, the attempt to defraud ICBC by misleading them about the date and time of his vehicle accident – was an egregious act of untrustworthiness that requires a licence suspension to address. Given that the Licensee sought to financially benefit from his actions, a fine was considered appropriate as well. Finally, Council believes that the two courses will help to correct the Licensee's behaviour if he continues to work in the insurance industry.
32. Council also intends to assess its investigation costs to the Licensee. As a self-funded regulatory body, Council looks to licensees who have engaged in misconduct to bear the costs of their disciplinary proceedings, so that those costs are not otherwise borne by British Columbia's licensees in general. Council has not identified any reason for not applying this principle in the circumstances.
33. Due to financial issues noted by the Licensee, Council intends to give him a 180-day deadline for payment of the fine and investigation costs, rather than the 90-day deadline that is applied in most of Council's disciplinary decisions.

INTENDED DECISION

34. Pursuant to sections 231, 236, and 241.1 of the Act, Council made an intended decision that:
- a. The Licensee's general insurance licence be suspended for a period of one year from the date of Council's order;
 - b. The Licensee be fined \$2,500, to be paid within 180 days of Council's order;
 - c. The Licensee be required to complete the following courses, or equivalent courses as approved by Council, within 90 days of Council's order:
 - i. the Council Rules Course for General Insurance Agents, Salespersons and Adjusters; and
 - ii. the Ethics and the Insurance Professional course, available through the Insurance Institute of Canada; (collectively, "the Courses")
 - d. The Licensee be assessed Council's investigation costs of \$1,277.50, to be paid within 180 days of Council's order; and
 - e. A condition be imposed on the Licensee's general insurance licence that failure to complete the Courses and to pay the fine and investigation costs in full by their deadlines will result in the continued suspension of the Licensee's licence, and the Licensee will not be permitted to complete his 2027 annual licence renewal until such time as the Licensee has complied with the conditions listed herein.
35. Subject to the Licensee's right to request a hearing before Council pursuant to section 237 of the Act, the intended decision will take effect after the expiry of the hearing period.

ADDITIONAL INFORMATION REGARDING FINES/COSTS

36. Council may take action or seek legal remedies against the Licensee to collect outstanding fines and/or costs, should these not be paid by the 180-day deadline.

RIGHT TO A HEARING

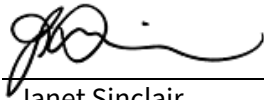
37. If the Licensee wishes to dispute Council's findings or its intended decision, the Licensee may have legal representation and present a case in a hearing before Council. Pursuant to section 237(3) of the Act, to require Council to hold a hearing, the Licensee **must give notice to Council by delivering to its office written notice of this intention within fourteen (14) days of receiving this intended**

decision. A hearing will then be scheduled for a date within a reasonable period of time from receipt of the notice. Please direct written notice to the attention of the Executive Director. **If the Licensee does not request a hearing within 14 days of receiving this intended decision, the intended decision of Council will take effect.**

38. Even if this decision is accepted by the Licensee, pursuant to section 242(3) of the Act, the British Columbia Financial Services Authority ("BCFSA") still has a right of appeal to the Financial Services Tribunal ("FST"). The BCFSA has thirty (30) days to file a Notice of Appeal once Council's decision takes effect. For more information respecting appeals to the FST, please visit their website at www.bcfst.ca or visit the guide to appeals published on their website at <https://www.bcfst.ca/app/uploads/sites/832/2021/06/guidelines.pdf>.

Dated in Vancouver, British Columbia, on the **20th day of February, 2025.**

For the Insurance Council of British Columbia



Janet Sinclair
Executive Director