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Salt Lake City, UT 84114-0874
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BEFORE THE INSURANCE COMMISSIONER OF THE STATE OF UTAH

COMPLAINANT: UTAH INSURANCE DEPARTMENT **RESPONDENT:** STANDARD LIFE & ACCIDENT INSURANCE COMPANY One Moody Plaza Galveston, TX 77550 Utah Company Id. No.: 709	**2ND AMENDED NOTICE OF INFORMAL ADJUDICATIVE PROCEEDING AND ORDER** DOCKET No. 2012-075-HL Enf. Case No. 3140

The Utah Insurance Department has commenced this informal adjudicative proceeding pursuant to Utah Code Annotated §§ 31A-2-201 and 63G-4-201 and Utah Administrative Code Rule R590-160. Based upon information contained in agency files or known to the Commissioner, the Commissioner makes the following:

FINDINGS OF FACT

1. Respondent is an insurer domiciled in the State of Texas and authorized to do the business of insurance in the State of Utah, Utah Company Identification No. 709.

2. Respondent failed to timely file the annual Actuarial Certification Report electronically via SERFF on or before April 1, 2012, as required by Utah Code Ann. § 31A-29-117, Utah Admin. Code Rule R590-220-11, and Department Bulletin 2007-3.

3. As of May 7, 2012, the date this action was first initiated, Respondent had still not filed the required Report.

4. Respondent filed the required Report on May 16, 2012.

Having entered his Findings of Fact, the Commissioner now enters his:

CONCLUSION OF LAW

1. In failing to timely file its annual Actuarial Certification Report, Respondent violated Utah Code Ann. § 31A-29-117 and Utah Admin. Code Rule R590-220-10.

2. Pursuant to Utah Code Ann. § 31A-2-308, the commissioner may impose a forfeiture of up to $5,000.00 per violation of the Utah Insurance Code or Rules.

Based upon the foregoing Findings of Fact and Conclusions of Law, the Commissioner now enters the following:

ORDER

IT IS HEREBY ORDERED:

1. Respondent is assessed an administrative forfeiture in the amount of $3,000.00. Said forfeiture shall be paid no later than ten (10) days after the date this Order becomes final.

2. This Order shall become final fifteen (15) days after the date of mailing unless a written request for a hearing is received from the Respondent in the offices of the department prior to that date. A written request for a hearing shall be signed by the person making the

request and shall state the basis for the relief requested.

NOTIFICATION

If you request a hearing regarding this matter, the department will be represented by M. Gale Lemmon, Assistant Attorney General, 160 East 300 South, Fifth Floor, P.O. Box 140874, Salt Lake City, Utah 84114-0874, Telephone Number (801) 366-0375. Failure to request a hearing will be considered a failure to exhaust administrative remedies and will preclude any further administrative or judicial review or appeal of this matter.

You are further notified that a failure to obey an Order of the commissioner may subject you to further penalties, including forfeitures of up to $5,000.00 per violation and the suspension or revocation of your license and the filing of an action in District Court, which may impose forfeitures of up to $10,000.00 per day for continued violation.

You are further notified that other jurisdictions in which you may be licensed may require that you report this action to them.

DATED THIS 13th day of July, 2012.

NEAL T. GOOCH
INSURANCE COMMISSIONER

Mark E. Kleinfield

MARK KLEINFIELD, J.D.
ADMINISTRATIVE LAW JUDGE
Utah Insurance Department
State Office Building, Room 3110
Salt Lake City, Utah 84114
Telephone (801) 538-3800

CERTIFICATE OF MAILING

I do hereby certify that on this date I mailed, by regular mail, postage prepaid a true and correct copy of the attached:

AMENDED
NOTICE OF INFORMAL
ADJUDICATIVE PROCEEDING
AND ORDER

To the following:

STANDARD LIFE & ACCIDENT INS. CO
ATTN: EARL TAYLOR
ONE MOODY
GALVESTON, TX 77550

DATED this 17th day of July, 2012

Linda Hardy
Market Conduct

UTAH
Invoice

Printed Date: July 17, 2012

Invoice Date: May 07, 2012
Balance Due: $3,000.00
Due Date: June 01, 2012
Invoice ID: 578925

STANDARD LIFE ACCIDENT INSURANCE COMPANY
ONE MOODY PLAZA
GALVESTON TX 77550

Item Description		Amount
Monetary Penalty Company		$4,500.00
	Original Amount Due	$4,500.00
Adjustments Provided		
5/31/2012 Monetary Penalty Company Price Adjustment		($1,500.00)
	Adjusted Amount Due	$3,000.00
Payments Received		
	Balance Due	

UTAH
Invoice

Printed Date: July 17, 2012

Invoice Date: May 07, 2012
Balance Due: $3,000.00
Due Date: June 01, 2012
Invoice ID: 578925

Make checks payable to: Utah Insurance Department

Send payment to:

Utah Insurance Department
3110 State Office Building
Salt Lake City, UT 84114-6901

Detach and Return with Payment