

**BEFORE THE INSURANCE COMMISSIONER
STATE OF OKLAHOMA**

FILED

AUG 16 2011

INSURANCE COMMISSIONER
OKLAHOMA

STATE OF OKLAHOMA, *ex rel.*)
JOHN D. DOAK,)
Insurance Commissioner,)
)
Plaintiff,)
)
vs.)
)
)
SANTA FE AUTO INSURANCE COMPANY,)
A foreign insurance company)
)
Respondent.)

Case No. 11-0562-DIS

CONSENT ORDER

COMES NOW the State of Oklahoma *ex rel.* John D. Doak, Insurance Commissioner, by and through his attorney, Natasha M. Scott, and states as follows:

JURISDICTION

1. The Insurance Commissioner is charged with the duties of administering and enforcing the provisions of the Oklahoma Insurance Code found at 36 O.S. §§ 101-7204.
2. Santa Fe Auto Insurance Company (“Respondent”) is a licensed foreign insurance company, holding NAIC ID number 12223.
3. Respondent has been apprised of its rights including the right to a public hearing and has knowingly and freely waived said rights and entered into this Consent Order as a voluntary settlement of the issues and questions raised in the above captioned case.

ALLEGATIONS OF FACT

1. On or about February 17, 2011, an inquiry, bearing that date, regarding claim number 2581511.001 was mailed by the Oklahoma Insurance Department (“Department”) to Respondent. (Exhibit “A”).

2. The thirtieth (30th) day after the date of the inquiry was March 19, 2011. However, that date was a Saturday; thus, the thirtieth (30th) day became Monday, March 21, 2011.

3. On March 22, 2011, the Department mailed a second letter to Respondent stating that a response to the initial inquiry had not been received. (Exhibit “B”).

4. On March 25, 2011, the Department received Respondent’s response dated March 23, 2011 and acknowledging receipt of the Department’s initial inquiry of February 17, 2011. (Exhibit “C”).

5. Respondent explained that it believed it was required to respond within thirty (30) days from Respondent’s receipt of the Department’s inquiry, rather than within thirty (30) days from the date of the inquiry. Respondent has also explained that this alone was the cause of the delayed response.

CONCLUSIONS OF LAW

The allegations herein are found to be true and correct, and Respondent has violated 36 O.S. § 1250.4(B) by failing to furnish an adequate response to an inquiry from the Insurance Commissioner within thirty (30) days from the date of the inquiry.

ORDER AND CONSENT

IT IS THEREFORE ORDERED AND CONSENTED to that Santa Fe Auto Insurance Company is fined in the amount of Five Hundred Dollars (\$500.00). The

Conditional Administrative Order and Notice of Right to be Heard previously issued in this matter is hereby withdrawn.

WITNESS My Hand and Official Seal this 15th day of August 2011.



PAUL WILKENING
DEPUTY INSURANCE COMMISSIONER
OF ADMINISTRATION
STATE OF OKLAHOMA

A handwritten signature in black ink, appearing to read "Paul Wilkening", written over a horizontal line.

APPROVED:

A handwritten signature in black ink, appearing to read "Natasha M. Scott", written over a horizontal line.

NATASHA M. SCOTT
Assistant General Counsel

A handwritten signature in black ink, appearing to read "Dick H", written over a horizontal line.

SANTA FE AUTO INSURANCE COMPANY
Respondent

CERTIFICATE OF MAILING

On this 16th day of August, a true and correct copy of the above and foregoing *Conditional Administrative Order and Notice of Right to Be Heard* was mailed, via certified mail, to:

David Bennett, Vice President
Santa Fe Auto Insurance Company
13702 Gamma Rd.
Dallas, TX 75244

Matt Parr
Santa Fe Auto Insurance Company
13702 Gamma Rd.
Dallas, TX 75244

A handwritten signature in black ink, appearing to read "Natasha M. Scott", written over a horizontal line.

Natasha M. Scott

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Postage \$
 Certified Fee
 Return Receipt Fee (Endorsement Required)
 Restricted Delivery Fee (Endorsement Required)
 Total Post:



Sent To
 Street, Apt. 1
 or PO Box A
 City, State, ZIP

David Bennett, Vice President
 Santa Fe Auto Insurance Co
 13702 Gamma Rd.
 Dallas, TX 75244
 sms/11-0562-DIS/Const. Ord.

PS Form 3800, August 2006

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

David Bennett, Vice President
 Santa Fe Auto Insurance Co
 13702 Gamma Rd.
 Dallas, TX 75244
 sms/11-0562-DIS/Const. Ord.

2. Article Number
 (Transfer from service label)

7008 1830 0003 9411 4308

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
 B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? Yes
 No

enter delivery address below:

OKLAHOMA INSURANCE DEPARTMENT
 RECEIVED
 AUG 23 2011

Legal Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

7008 1830 0003 9411 4315

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Restricted Delivery Fee (Endorsement Required)		
Total Post		

Matt Parr

Sent To: Santa Fe Auto Insurance Company
 Street, Apt. or PO Box: 13702 Gamma Rd.
 City, State: Dallas, TX 75244
 sms/11-0562-DIS/Const. Ord.

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p><i>Hopper</i></p> <p>B. Received by (Printed Name) <i>Hopper</i></p> <p>C. Date of Delivery <i>8-18-11</i></p> <p>Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; margin: 10px;"> <p>Matt Parr Santa Fe Auto Insurance Company 13702 Gamma Rd. Dallas, TX 75244 sms/11-0562-DIS/Const. Ord.</p> </div>	<p>OKLAHOMA INSURANCE DEPARTMENT RECEIVED AUG 23 2011 Legal Division</p>
<p>2. Article Number (Transfer from service label)</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>7008 1830 0003 9411 4315</p>	
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	