

M. GALE LEMMON #4363
Assistant Attorney General
MARK L. SHURTLEFF #4666
Attorney General
Attorneys for Utah Insurance Department
160 East 300 South, Fifth Floor
P.O. Box 140874
Salt Lake City, UT 84114-0874
Telephone (801) 366-0375

BEFORE THE INSURANCE COMMISSIONER OF THE STATE OF UTAH

COMPLAINANT:	:	AMENDED NOTICE OF INFORMAL ADJUDICATIVE PROCEEDING AND ORDER
UTAH INSURANCE DEPARTMENT	:	
	:	
RESPONDENT:	:	
	:	
KENNETH OWEN MONSON	:	DOCKET No. <u>2010-125-LC</u>
11867 Marsh Dee Road, Apt. 3-103	:	
Herriman, UT 84096	:	Enf. Case No. <u>2713</u>
License No. 135481	:	
	:	

The Utah Insurance Department has commenced this informal adjudicative proceeding pursuant to Utah Code Annotated (U.C.A.) §§ 31A-2-101 and 63-46b-3 and Utah Administrative Code (U.A.C.) 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 agent authorized to do the business of insurance in the State of Utah holding License number 135481.
2. Respondent failed to properly respond to an inquiry of the Commissioner dated April 22, 2010.

3. Thereafter, Respondent was required, by certified letter dated July 12, 2010, to provide a substantive response to the Commissioner's initial inquiry on or before July 21, 2010.

4. As of the date of this Notice of Informal Adjudicative Proceeding and Order, no response has been received and the time for response and any extensions granted has expired.

5. Respondent currently has an unpaid tax lien filed against him totaling \$955.76, and two civil judgments that remain unpaid for over 60 days from the date those judgments became final, totaling \$10,527.69.

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

CONCLUSION OF LAW

1. In failing to submit a timely response to an inquiry from the Commissioner, the Respondent violated U.C.A. Subsection 31A-2-202(4).

2. Outstanding tax liens and unpaid civil judgments are grounds for revocation of a license under Utah Code Annotated § 31A-23a-111(5)(b), and grounds for placing a license on probation under Utah Code Annotated § 31A-23a-112.

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

ORDER

IT IS HEREBY ORDERED:

1. Respondent shall pay an administrative forfeiture in the amount of \$250.00. Said

forfeiture shall be paid in two payments of \$125.00 each. The first payment shall be paid no later than 30 days after the date this Order becomes final. The second payment shall be paid no later than 60 days after the date this Order becomes final.

2. Respondent's individual insurance producer's license is placed on probation for a period of 24 months. The terms of probation are as follows:

- A. Respondent shall pay the administrative forfeiture assessed herein in a timely manner.
- B. Respondent shall promptly notify the department of any change in his resident address, business address, or mailing address and his resident or business telephone numbers.
- C. Respondent shall have no further civil judgments or tax liens filed against him and shall have no violations of the law other than minor traffic offenses.
- D. During the period of probation, Respondent shall not obtain an insurance agency license.
- E. Respondent shall have no further violations of the Utah Insurance Code or Rules or of any order of the commissioner.

3. 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 \$2,500.00 per violation and the suspension
or revocation of your license and the filing of an action to enforce this Order 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 20th day of September, 2010.

NEAL T. GOOCH
INSURANCE COMMISSIONER


MARK KLEINFIELED, 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:

Kenneth Owen Monson
11867 Marsh Dee Road, Apt. 3-103
Herriman, UT 84096

DATED this 28th day of September, 2010



Linda Hardy
Utah Department of Insurance
State Office Building, Room 3110
Salt Lake City, UT 84114-6901

UTAH
Invoice - Original

Printed Date: September 28, 2010
Invoice Date: August 10, 2010
Balance Due: \$250.00
Due Date: September 07, 2010
Invoice ID: 472096

Payor ID: 65177

MONSON KENNETH OWEN
5503 W 9000 S M102
WEST JORDAN UT 84081

Item Description	Amount
9/28/2010 Monetary Penalty Individual E-Case 2713 Docket 2010-125 LC	\$500.00
	<hr/>
Original Amount Due	\$500.00
Adjustments Provided	
9/28/2010 Monetary Penalty Individual Price Adjustment	(\$250.00)
	<hr/>
Adjusted Amount Due	\$250.00
Payments Received	
	<hr/>
	Balance Due

UTAH
Invoice - Original

Invoice Date: August 10, 2010
Balance Due: \$250.00
Due Date: September 07, 2010
Invoice ID: 472096
Payor ID: 65177
Payor Name: MONSON, KENNETH
OWEN

Make checks payable to: Utah Insurance Department

Send payment to:

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