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**BEFORE THE INSURANCE COMMISSIONER
OF THE STATE OF UTAH**

COMPLAINANT:

UTAH STATE INSURANCE DEPARTMENT

RESPONDENT:

RESPONDENT:

CASEY L. HOFFERT
License No. 327339
215 Pine Street
Waverly, IA 50677-4050

9319 Taylor Road
Janesville, IA 50647-1149

519 E. Jackson St.
Shell Rock, IA 50670-7718

**DEFAULT AND
DEFAULT ORDER**

Docket No. 2010-159-LC

Enf. Case No. 2725

DEFAULT

On Tuesday, the 15th day of March at 9:00 a.m., the date and time set for the Hearing on the Order to Show Cause in this matter, the Complainant appeared by and through its counsel, M.

Gale Lemmon, Assistant Attorney General, the Respondent failed to appear either in person or through counsel and has failed to make any contact with the department or department's counsel. The presiding officer found that service was proper on the Respondent.

Having failed to appear, pursuant to Utah Code Annotated Section 63G-4-209, the Default of the Respondent is hereby entered.

DATED this 17th day of March, 2011.

NEAL T. GOOCH
INSURANCE COMMISSIONER



MARK E. KLEINFELD, Esq.
Presiding Officer

DEFAULT ORDER

The Default of the Respondent having previously been entered, the presiding officer hereby adopts the allegations in the Motion for Order to Show Cause as his Findings of Fact and Conclusions of Law, and enters the following Order:

IT IS HEREBY ORDERED:

1. The insurance license of the Respondent, Casey L. Hoffert, is hereby revoked forthwith.
2. Respondent shall immediately cease doing any insurance business in the State of Utah.

NOTIFICATION

Respondent is hereby notified that failure to abide by the terms of this Order may subject it to further penalties, including additional forfeitures of up to \$5,000.00 per violation and the filing of an action to enforce this Order in the District Court which may impose penalties 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 17th day of March, 2011.

NEAL T. GOOCH
INSURANCE COMMISSIONER



MARK E. KLEINFELD, Esq.
Presiding Officer
Utah Department of Insurance
State Office Building, Room 3110
Salt Lake City, Utah 84114
Telephone (801) 538-3800



Insurance Department

State of Utah

GARY R. HERBERT
Governor

GREG BELL
Lieutenant Governor

NEAL T. GOOCH
Commissioner

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:

DEFAULT AND
DEFAULT ORDER

LICENSE REVOKED

To the following:

Casey L. Hoffert
215 Pine St.
Waverly, IA 50677-4050

&

Casey L. Hoffert
9319 Taylor Road
Jamesville, IA 50647-1149

&

Casey L. Hoffert
519 E. Jackson St.
Shell Rock, IA 50670-7718

DATED this 22th day of March, 2011


Linda Hardy

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