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## BEFORE THE INSURANCE COMMISSIONER OF THE STATE OF UTAH

**COMPLAINANT:**

UTAH STATE INSURANCE DEPARTMENT

**RESPONDENT:**

TROY ANDREW TRIPP  
8790 Crow Rd.  
Litchfield, OH 44253  
License No. 363643

**DEFAULT AND  
DEFAULT ORDER**

**Docket No.** 2011-056-LC

**Enf. Case No.** 2845

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**DEFAULT**

On Tuesday, the 26<sup>th</sup> day of July, 2011 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 attorney, M. Gale Lemmon, Assistant Attorney General, the Respondent failed to appear either in person or through counsel. Therefore, pursuant to Utah Code Annotated Section 63G-4-209, the Default of the Respondent is hereby entered.

DATED this \_\_\_\_\_ day of JUL 27 2011, 2011.

NEAL T. GOOCH  
INSURANCE COMMISSIONER



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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 an 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, Troy Andrew Tripp, 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 him 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 \_\_\_\_\_ day of JUL 27 2011, 2011.

NEAL T. GOOCH  
INSURANCE COMMISSIONER



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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:

Troy Andrew Tripp  
8790 Crow Road  
Litchfield, OH 44253

DATED this 1<sup>st</sup> day of August, 2011

A handwritten signature in cursive script that reads "Linda Hardy".

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