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

COMPLAINANT:	:	NOTICE OF INFORMAL ADJUDICATIVE PROCEEDING AND ORDER
UTAH INSURANCE DEPARTMENT	:	
RESPONDENT:	:	
ARTISAN TITLE INSURANCE AGENCY, INC	:	DOCKET No. <u>2012-077 PC</u>
6975 S. Union Park Center, Ste. 470	:	
Cottonwood Heights, Utah 84047	:	Enforcement Case No. <u>3129</u>
Attn: David C. Delahunty	:	
	:	
License No. 352917	:	

The Utah Insurance Department has commenced this informal adjudicative proceeding pursuant to Utah Code Ann. §§ 31A-2-101 and 63-46b-3 and Utah Admin. Code 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 a licensed title insurance agency in the State of Utah.
2. Respondent failed to pay the Branch Office and Recovery Fund Assessments due by December 30, 2011.
3. Respondent failed to respond to an inquiry of the Commission dated February 27, 2012 with a time for response no later than March 5, 2012.

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.

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

CONCLUSION OF LAW

1. In failing to pay an assessment when due, Respondent violated Utah Code Ann. §31A-23a-415 and R592-10.

2. In failing to submit a response to an inquiry from the Commissioner, the Respondent violated Utah Code Ann. Subsection 31A-2-202(4).

3. 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 \$1,500.00. 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, (PO Box 140874), Salt Lake City, Utah 84114-0874, Telephone Number (801) 266-0375. Failure to request a

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, (PO Box 140874), Salt Lake City, Utah 84114-0874, Telephone Number (801) 266-0375. 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 of 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.

Questions regarding this Adjudicative Proceeding should be directed to Tammy Greening at the Utah Insurance Department (801) 538-3786.

DATED THIS 7th day of May, 2012.

NEAL T. GOOCH
INSURANCE COMMISSIONER



MARK KLEINFELD, 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

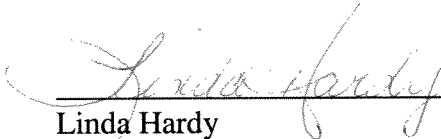
I do hereby certify that on this date I mailed, by regular mail, postage prepaid a true and correct copy of the attached:

NOTICE OF INFORMAL
ADJUDICATIVE PROCEEDING
AND ORDER

To the following:

Artisan Title Insurance Agency, Inc.
Attn: David C. Delahuntly
6975 S. Union Park Center, Ste. 470
Cottonwood Height, UT 84047

DATED this 7th day of May, 2012



Linda Hardy
Market Conduct

**UTAH
Invoice**

Printed Date: May 07, 2012

Invoice Date: May 07, 2012
Balance Due: \$1,500.00
Due Date: June 11, 2012
Invoice ID: 578927

ARTISAN TITLE INSURANCE AGENCY INC
6975 SOUTH UNION PARK 470
COTTONWOOD HEIGHTS UT 84047

Item Description	Amount
Monetary Penalty Agency	\$1,500.00
Original Amount Due	\$1,500.00
Payments Received	
	Balance Due

**UTAH
Invoice**

Printed Date: May 07, 2012

Invoice Date: May 07, 2012
Balance Due: \$1,500.00
Due Date: June 11, 2012
Invoice ID: 578927

Make checks payable to: Utah Insurance Department

Send payment to:

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