

Utah Insurance Department
State Office Building, Rm 3110
Salt Lake City, UT 84114
(801)538-3800

**BEFORE THE INSURANCE COMMISSIONER
STATE OF UTAH**

**UTAH INSURANCE DEPARTMENT,
COMPLAINANT**

vs.

**ANTHONY VALENTI, License No. 409510,
RESPONDENT.**

**NOTICE OF INFORMAL
AGENCY ACTION
AND ORDER**

Docket No. 2014-020 LC
Enf. Case No. 3449
Judge Mark Kleinfeld
Administrative Law Judge

The Utah Insurance Department has commenced this informal adjudicative proceeding pursuant to Utah Code Ann. §§ 31A-2-201 and 63G-4-201 and Utah Admin. Code R590-160. Based upon information contained in agency files or known to the Department, the Department asserts the following facts:

FACTs

1. Respondent is a non-resident insurance agent authorized to do the business of insurance in the State of Utah holding License Number 409510.
2. Respondent failed to properly respond to an inquiry of the Commissioner, dated November 25, 2013, and sent to Respondent's following address on file with the Department: 3122 Hidden Ridge Terrace, Abingdon, Maryland 21009.
3. Respondent's former employer provided the Department with the following new address to which a request for explanation was also sent: 5024 Campbell Blvd, Suite N, Maryland 21236. A response was due on December 13, 2013.

4. A second request for explanation was mailed to respondent to the address on file, as well as, the new address provided by Respondent`s former employer. A response date was due December 27, 2013.

5. The Department contacted Respondent by telephone and a message was left requesting a call back. No response has been received to this date.

6. Thereafter, Respondent was required, by a letter dated January 15, 2014 to provide a substantive response to the Commissioner`s initial inquiry on or before January 29, 2014.

6. As of the date of this Notice of Agency Action and Order, no response has been received and the time for response and any extensions granted have expired.

BASED UPON THE FOREGOING FACTS

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

Based upon the foregoing facts, the Commissioner now enters the following Order:

ORDER

IT IS HEREBY ORDERED:


1. Respondent is assessed an administrative forfeiture in the amount of \$250.00. Said forfeiture shall be paid no later than ten (10) days after the date this Order becomes final.

2. Respondent shall provide a substantive response to the Commissioner`s inquiries to be received in the offices of the Utah Insurance Department no later than ten (10) days after the date this Order becomes final.

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.

DATED THIS 16th day of February, 2014.

TODD E. KISER
INSURANCE COMMISSIONER



MARK KLEINFELD
Administrative Law Judge
Utah Insurance Department
State Office Building, Room 3110
Salt Lake City, Utah 84114
Telephone (801) 538-3800

NOTIFICATION

If you request a hearing regarding this matter, the department will be represented by Gary Josephson, 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.

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
AGENCY ACTION
AND ORDER

To the following:

Anthony Valenti
3122 Hidden Ridge Terrace
Abingdon, MD 21009

DATED this 18th February, 2014



LINDA HARDY
MARKET CONDUCT
UTAH INSURANCE DEPARTMENT
SALT LAKE CITY, UT 84114-6901



State of Utah

GARY R. HERBERT
Governor

SPENCER J. COX
Lieutenant Governor

Insurance Department

UTAH Invoice - Original

VALENTI, ANTHONY
3122 HIDDEN RIDGE TERRACE
ABINGDON MD 21009

Printed Date: February 18, 2014
Invoice Date: February 18, 2014
Balance Due: \$500.00
Due Date: March 25, 2014
Invoice ID: 683389
Payor ID: 1491529

Date	Item Description	Amount
02-18-2014	Monetary Penalty Individual	\$500.00

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No Adjustments

No Payments

Balance Amount Due \$500.00

UTAH Invoice - Original

Make check payable to: Utah Insurance Department
Send payment to:
Utah Insurance Department
3110 State Office Building
Salt Lake City, UT 84114-6901

Invoice Date: February 18, 2014
Balance Due: \$500.00
Due Date: March 25, 2014
Invoice ID: 683389
Payor ID: 1491529

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**Detach and Return this Voucher with Payment
Payments Will Not Be Processed without Voucher**