

LAWRENCE G. WASDEN  
Attorney General

A. RENÉ MARTIN – I.S.B. #3188  
Deputy Attorney General  
Idaho Department of Insurance  
700 West State Street  
P.O. Box 83720  
Boise, ID 83720-0043  
Telephone: (208) 334-4204  
Facsimile: (208) 334-4298

*Attorneys for Department of Insurance*

FILED

JAN 06 2012

Department of Insurance  
State of Idaho

**BEFORE THE DIRECTOR OF THE DEPARTMENT OF INSURANCE**

**STATE OF IDAHO**

In the Matter of:

ATLANTIC MUTUAL INSURANCE  
COMPANY,

Certificate of Authority No. 493  
NAIC No. 19895

Docket No. 18-2599-12

**ORDER CONTINUING SUSPENSION  
OF CERTIFICATE OF AUTHORITY**

WHEREAS, Certificate of Authority No. 493 issued to ATLANTIC MUTUAL INSURANCE COMPANY (ATLANTIC MUTUAL), a New York-domiciled insurer licensed for property and casualty insurance, including worker's compensation insurance, in the state of Idaho under said certificate of authority, has been suspended by the Director of the Idaho Department of Insurance (Director) by orders dated March 31, 2010, and February 17, 2011, pursuant to Idaho Code § 41-326(1)(b); and

WHEREAS, ATLANTIC MUTUAL was placed into liquidation on April 27, 2011, by order of the Supreme Court of the State of New York, Index No. 402424/10, based on the petition of the Superintendent of Insurance of the State of New York;

NOW, THEREFORE, IT IS HEREBY ORDERED, pursuant to Idaho Code § 41-327(3), that Certificate of Authority No. 493 issued to ATLANTIC MUTUAL be CONTINUED IN SUSPENSION effective immediately for a period of one (1) year from the date of this order. The Director may terminate the suspension sooner if the cause for said suspension is corrected and ATLANTIC MUTUAL is otherwise in compliance with title 41, Idaho Code.

IT IS FURTHER ORDERED that ATLANTIC MUTUAL comply with the requirements of Idaho Code § 41-329, including § 41-329(2), which provides: "During the suspension period the insurer shall not solicit or write any new business in this state, but shall file its annual statement, pay fees, licenses, and taxes as required under this code, and may service its business already in force in this state, as if the certificate of authority had continued in full force."

IT IS FURTHER ORDERED, pursuant to Idaho Code § 41-330(1), that, within four (4) days after notice of this suspension is provided, ATLANTIC MUTUAL shall notify, by any available means, every person authorized to write business in the state of Idaho by said insurance company, to immediately cease to write any further insurance business for ATLANTIC MUTUAL in Idaho.

### **NOTIFICATION OF RIGHTS**

This is a final order of the Director. Any party may file a motion for reconsideration of this final order within fourteen (14) days of the service date of this order. The agency will dispose of the petition for reconsideration within twenty-one (21) days of its receipt, or the petition will be considered denied by operation of law. *See* Idaho Code § 67-5246(4).

Pursuant to Idaho Code §§ 67-5270 and 67-5272, any party aggrieved by this final order or orders previously issued in this case may appeal this final order and all previously issued orders in this case to district court by filing a petition in the district court of the county in which:

- i. A hearing was held,

- ii. The final agency action was taken,
- iii. The party seeking review of the order resides, or operates its principal place of business in Idaho, or
- iv. The real property or personal property that was the subject of the agency action is located.

An appeal must be filed within twenty-eight (28) days of (a) the service date of this final order, (b) an order denying petition for reconsideration, or (c) the failure within twenty-one (21) days to grant or deny a petition for reconsideration, whichever is later. *See Idaho Code § 67-5273.* The filing of an appeal to district court does not itself stay the effectiveness or enforcement of the order under appeal.

DATED this 6<sup>TH</sup> day of January 2012.

STATE OF IDAHO  
DEPARTMENT OF INSURANCE

  
\_\_\_\_\_  
WILLIAM W. DEAL  
Director

## CERTIFICATE OF SERVICE

I HEREBY CERTIFY that, on this 6th day of January 2012, I caused a true and correct copy of the foregoing order to be served upon the following by the designated means:

Atlantic Mutual Insurance Company  
100 Wall Street, 28<sup>th</sup> Floor  
New York, NY 10005-3743

- ☒ first class mail
- ☐ certified mail
- ☐ hand delivery
- ☐ via facsimile

Idaho Guaranty Association  
Attn: Dave Edwards  
Western Guaranty Fund Services  
[dedwards@wgfs.org](mailto:dedwards@wgfs.org)

- ☐ first class mail
- ☐ certified mail
- ☐ hand delivery
- ☒ via email

Idaho Industrial Commission  
Attn: Michael Dahlmeir  
[mdahlmeir@iic.idaho.gov](mailto:mdahlmeir@iic.idaho.gov)

- ☐ first class mail
- ☐ certified mail
- ☐ hand delivery
- ☒ via email

Idaho State Treasurer's Office  
Attn: Angela Bonaminio  
[angela.bonaminio@sto.idaho.gov](mailto:angela.bonaminio@sto.idaho.gov)


- ☐ first class mail
- ☐ certified mail
- ☐ hand delivery
- ☒ via email

National Council on Compensation Insurance  
Attn: Michelle Smith  
[michelle\\_smith@NCCI.com](mailto:michelle_smith@NCCI.com)

- ☐ first class mail
- ☐ certified mail
- ☐ hand delivery
- ☒ via email

A. René Martin  
Deputy Attorney General  
Idaho Department of Insurance  
P.O. Box 83720  
Boise, ID 83720-0043

- ☐ first class mail
- ☐ certified mail
- ☒ hand delivery
- ☐ via facsimile

  
Teresa Jones