

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

STATE OF ALASKA
DEPARTMENT OF COMMUNITY AND ECONOMIC DEVELOPMENT
DIVISION OF INSURANCE

550 WEST 7TH AVENUE, SUITE 1560
ANCHORAGE, ALASKA 99501-3567

STATE OF ALASKA
DEPARTMENT OF COMMUNITY AND ECONOMIC DEVELOPMENT
DIVISION OF INSURANCE
550 WEST 7TH AVENUE, SUITE 1560
ANCHORAGE, ALASKA 99501-3567
PHONE: (907) 269-7900
FAX: (907) 269-7910 / TDD: (907) 465-5437

Order No. SR 01-14 (b)) Suspension of Certificate of
) Authority No F-1073
In the Matter of) Order under the Provisions
PENNSYLVANIA CASUALTY) Of AS 21.09.140 (a) (2)
COMPANY)
)
NAIC NO. 26107)
_____)

WHEREAS, a Certificate of Authority to transact the business of insurance
in the State of Alaska was issued to **PENNSYLVANIA CASUALTY**
COMPANY, domiciled in the Commonwealth of Pennsylvania.

WHEREAS, the State of Pennsylvania, being the state of domicile, has
placed **PENNSYLVANIA CASUALTY COMPANY** under an Order of
Rehabilitation dated November 19, 2001, which order continues to the present.

STATE OF ALASKA
DEPARTMENT OF COMMUNITY AND ECONOMIC DEVELOPMENT
DIVISION OF INSURANCE
550 WEST 7TH AVENUE, SUITE 1560
ANCHORAGE, ALASKA 99501-3567
PHONE: (907) 269-7900
FAX: (907) 269-7910 / TDD: (907) 465-5437

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29

WHEREAS, the Certificate of Authority issued to **PENNSYLVANIA CASUALTY COMPANY**, to transact the business of insurance in the State of Alaska was suspended effective November 1, 2001, for a period of one year and that suspension continues to the present.

WHEREAS, PENNSYLVANIA CASUALTY COMPANY has failed to pay the 2002 continuation fee as required by AS 21.09.130 (b) by the June 30, 2002 due date.

WHEREAS, PENNSYLVANIA CASUALTY COMPANY has failed to submit the 2001 Annual Statement due on March 1, 2002 under AS 21.09.200.

WHEREAS, the last statement received for **PENNSYLVANIA CASUALTY COMPANY** being the Quarterly Statement as of June 30, 2001, showed that the company failed to meet minimum Capital and Surplus requirement of AS 21.09.070 for the kinds of insurance authorized.

IT IS HEREBY ORDERED, pursuant to the provision of AS 21.09.140 (a) (2) that Certificate of Authority No F-1073 issued to **PENNSYLVANIA CASUALTY COMPANY** to transact the business of insurance in the State of Alaska shall be suspended for a period of one year unless terminated sooner as permitted by statute. Pursuant to AS 21.09.160 (b), this suspension shall automatically suspend the authority of all its agents to act as agents of **PENNSYLVANIA CASUALTY COMPANY** in this state.

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29

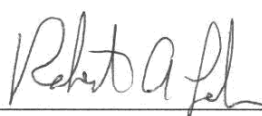
STATE OF ALASKA
DEPARTMENT OF COMMUNITY AND ECONOMIC DEVELOPMENT
DIVISION OF INSURANCE
550 WEST 7TH AVENUE, SUITE 1560
ANCHORAGE, ALASKA 99501-3567
PHONE: (907) 259-7900
FAX: (907) 259-7910 / TDD: (907) 465-5437

IT IS FURTHER ORDERED, that during the period of suspension
PENNSYLVANIA CASUALTY COMPANY shall not solicit or write any new
business in Alaska, but shall file the Annual Statement, pay fees and any taxes
due as provided by AS 21.09.170 (b).

IT IS FURTHER ORDERED that Certificate of Authority No. F-1073
will continue to be held in safekeeping by **PENNSYLVANIA CASUALTY**
COMPANY until such time as this Order of Suspension is replaced by an order
of Revocation or the Certificate of Authority is surrendered.

This Order is effective the first day of November 2002

Dated this 31st day of October 2002.



ROBERT A. LOHR, DIRECTOR
DIVISION OF INSURANCE