

FEB 14 2011

DEPT OF INSURANCE
BY 

STATE OF ARIZONA

DEPARTMENT OF INSURANCE

1 In the Matter of the Surrender of the Certificate of)
 2 Authority of)
 3 **C.P.A. Insurance Company**)
 4 **(NAIC No. 30082)**)
 5)
 6)
 7)
 8 **Petitioner.**)

Docket No. 11A-023-INS

ORDER

9 Based upon reliable evidence provided to the Director of Insurance by the Assistant
10 Director of the Financial Affairs Division of the Arizona Department of Insurance
11 ("Department"), the Director finds as follows:

FINDINGS OF FACT

12
13 1. C.P.A. Insurance Company ("Petitioner") is a Michigan domiciled insurance
14 company that received its certificate of authority to transact property and casualty insurance in
15 Arizona effective October 9, 1987.

16 2. Petitioner seeks to withdraw from the insurance business in Arizona and has
17 voluntarily surrendered its certificate of authority to the Director.

18 3. Petitioner has no outstanding obligations under any policy of insurance, whether
19 written direct or through reinsurance ceded to it, to policyholders or claimants who are
20 residents of this State.

1 4. Petitioner is not the subject of any pending investigation or market conduct
2 examination and does not owe this Department any filings or fees.

3 5. Petitioner has a \$100.00 deposit with the Insurance Examiners' Revolving Fund
4 ("IERF").

5 6. The Department holds a \$100,000 workers' compensation deposit on behalf of
6 the Petitioner.

7 7. Petitioner's 2010 Annual Statement and Annual Tax and Fees Report together
8 with payment of all applicable fees are due to this Department March 1, 2011.

9 **CONCLUSIONS OF LAW**

10 1. Petitioner has complied with the provisions of A.R.S. § 20-217 and with A.A.C.
11 R20-6-303 relating to the surrender of its Certificate of Authority and its withdrawal from the
12 insurance business.

13 2. Petitioner has complied with the provisions of A.R.S. § 20-588 and with A.A.C.
14 R20-6-303 relating to the release of its \$100,000 workers' compensation deposit.


15 **ORDER**

16 1. The surrender of the Petitioner's certificate of authority is accepted.

17 2. The Department shall release the \$100,000 workers' compensation deposit to
18 the Petitioner after the Department receives Petitioner's 2010 Annual Statement and Annual
19 Tax and Fees Report together with payment of all applicable fees. The Director has no
20 personal liability for the release of such deposit so made by her in good faith as provided in
21 A.R.S. §20-588(B).

1 3. The Department shall refund to the Petitioner the sum of \$100.00 that was
2 previously credited to the IERF pursuant to A.R.S. § 20-159.

3 Effective this 14th day of February, 2011.

4 
5 _____
6 **CHRISTINA URIAS**
7 **Director of Insurance**

8 COPY of the foregoing mailed/delivered
9 this 14th day of February, 2011, to:

10 Stephanie Shear, Vice President
11 CPA Insurance Company
12 P.O. Box 250010
13 West Bloomfield, Michigan 48325-0010

14 Gerrie Marks, Deputy Director
15 Mary Butterfield, Assistant Director
16 Steve Ferguson, Assistant Director
17 Catherine O'Neil, Consumer Legal Affairs Officer
18 Leslie Hess, Financial Affairs Legal Analyst
19 Cary W. Cook, Insurer Licensing Manager
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