

* 1474
fr

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

STATE OF ALASKA
DEPARTMENT OF COMMUNITY AND ECONOMIC DEVELOPMENT
DIVISION OF INSURANCE
3601 C STREET, SUITE 1324
ANCHORAGE, ALASKA 99503-5948

Order No. SR 00-5 (b)) Revocation of Certificate of
) Authority No F- 1474;
In the Matter of) Order under the Provisions
INTERNATIONAL) Of AS 21.09.140
INDEMNITY COMPANY)
)
NAIC NO. 35777)
_____)

STATE OF ALASKA
DEPARTMENT OF COMMUNITY AND ECONOMIC DEVELOPMENT
DIVISION OF INSURANCE
3601 C STREET, SUITE 1324
ANCHORAGE, ALASKA 99503-5948
PHONE: (907) 269-7900
FAX: (907) 269-7910 / TDD: (907) 465-5437

WHEREAS, a Certificate of Authority to transact the business of insurance
in the State of Alaska was issued to **INTERNATIONAL INDEMNITY
COMPANY**, domiciled in the State of Georgia.

WHEREAS, **INTERNATIONAL INDEMNITY COMPANY** was found
to be insolvent and placed into liquidation by an order of the Superior Court of
Fuller County, in the State of Georgia on January 18, 2001.

STATE OF ALASKA
DEPARTMENT OF COMMUNITY AND ECONOMIC DEVELOPMENT
DIVISION OF INSURANCE
3601 C STREET, SUITE 1324
ANCHORAGE, ALASKA 99503-5948
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, AS 21.09140 (a) (2) states that the director shall suspend or revoke an insurer's Certificate of Authority if the insurer no longer meets the requirements for the authority granted, on account of the insurer becoming impaired or insolvent or otherwise.

IT IS HEREBY ORDERED, pursuant to the provision of AS 21.09.150 (c) (2) that Certificate of Authority No F- 1474 issued to **INTERNATIONAL INDEMNITY COMPANY** to transact the business of insurance in the State of Alaska shall be revoked. The authority of all persons to act as agents of **INTERNATIONAL INDEMNITY COMPANY** in the State of Alaska shall be revoked.

IT IS FURTHER ORDERED, that Certificate of Authority No. F-1474 held in safekeeping by **INTERNATIONAL INDEMNITY COMPANY** shall be returned to the Alaska Division of Insurance by September 1, 2001. An Affidavit of Loss shall be filed if the Original Certificate of Authority is not available.

This Order is effective the 15th day of August 2001

Dated this 15th day of August 2001.



ROBERT A. LOHR, DIRECTOR
DIVISION OF INSURANCE