

# ENHANCED DEPARTMENT OF INSURANCE COMPLAINT

**Document Category:** Escalation & Legal Positioning

**Document Number:** 09-Enhanced of 33

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**Sarah Thompson**

4892 Pine Valley Drive

Alpharetta, GA 30009

(770) 555-7823

[sthompson.claims@email.com](mailto:sthompson.claims@email.com)

**Date:** June 15, 2024

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## SENT VIA ONLINE PORTAL, CERTIFIED MAIL, AND EMAIL

**Georgia Department of Insurance**

Consumer Services Division

2 Martin Luther King Jr. Drive

West Tower, Suite 704

Atlanta, GA 30334

[Consumer.Complaints@oci.ga.gov](mailto:Consumer.Complaints@oci.ga.gov)

Online Portal: Complaint Reference #GA-2024-15847

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## Re: FORMAL COMPLAINT AGAINST INSURER - REQUEST FOR IMMEDIATE INVESTIGATION

**Insurance Company:** Premier National Insurance Company

**NAIC Number:** 42857

**Policy Number:** HO-338947562

**Claim Number:** 2024-WS-7749

**Date of Loss:** May 8, 2024

**Amount in Dispute:** \$187,500

**Policy Type:** Homeowners HO-3

**Complaint Priority:** ☒ Urgent ☐ Elderly/Disabled ☐ Military ☒ Natural Disaster

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Dear Commissioner King and Consumer Services Division:

I am filing this formal complaint against Premier National Insurance Company for egregious violations of Georgia insurance regulations, systematic bad faith claim handling, and unfair settlement practices that appear to constitute a pattern of deliberate misconduct requiring immediate regulatory intervention.

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## EXECUTIVE SUMMARY

Premier National Insurance Company has engaged in a calculated pattern of bad faith conduct designed to avoid paying legitimate claims through tactics including unreasonable delays, misrepresentations of coverage, lowball settlement offers, intimidation tactics, and document manipulation. These actions violate Georgia Insurance Code Sections 33-6-34, 33-4-6, and 33-6-37, and constitute unfair claims settlement practices requiring immediate investigation and sanctions.

### Immediate Relief Requested:

1. Emergency intervention to prevent further harm
  2. Order directing immediate claim payment
  3. Market conduct examination of Premier National
  4. Sanctions and penalties for violations
  5. License review for pattern violations
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## I. COMPLAINANT INFORMATION

### Policyholder Details:

**Full Legal Name:** Sarah Marie Thompson

**Date of Birth:** March 12, 1968

**Policy Effective Date:** January 15, 2019

**Policy Renewal Date:** January 15, 2025

**Years with Carrier:** 5 years, 5 months

**Total Premiums Paid:** \$8,745

**Previous Claims:** One - 2021 water damage (\$12,000 - paid without issue)

**Current Status:** Active (threatened non-renewal)

### Vulnerable Population Indicators:

- ☐ Senior Citizen (65+)
- ☐ Disabled Individual

- ☐ Limited English Proficiency
  - ☐ Military/Veteran
  - ☒ Natural Disaster Victim (severe storms)
  - ☐ Low Income
  - ☒ Medical Hardship (stress-related hospitalization)
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## II. DETAILED CHRONOLOGY OF EVENTS

### Loss Event and Initial Reporting

#### May 8, 2024 - Day of Loss:

- Event occurred at 3:47 PM during severe thunderstorm
- Type of loss: Wind and hail damage to roof, siding, windows
- Cause of loss: EF-1 tornado touched down (NWS confirmed)
- Immediate actions taken: Tarpred roof, boarded windows, called carrier
- Documentation created: 147 photos, 3 videos, neighbor witness statements

#### May 8, 2024 - Same Day Reporting:

- Reported via: Phone at 5:15 PM
- Representative: Janet Mills, Claim Intake Specialist
- Claim number assigned: 2024-WS-7749
- Initial coverage confirmation: "Full coverage for wind damage, adjuster within 48 hours"
- Recording available: Yes (Reference #58847-2024)

### Pattern of Violations Timeline

#### May 10, 2024 - Day 2 After Loss:

- Event: No adjuster contact despite 48-hour promise
- Violation: GA Code §33-6-34 (prompt investigation)
- Evidence: Call logs showing 6 attempts to reach adjuster
- Impact: Rain entered home causing additional damage

#### May 15, 2024 - Day 7 After Loss:

- Event: Adjuster finally arrives, spends only 12 minutes on site
- Violation: GA Code §33-6-34 (inadequate investigation)

- Evidence: Security camera footage, neighbor witness
- Impact: Failed to document obvious damage

#### **May 22, 2024 - Day 14 After Loss:**

- Event: Denial letter claiming "wear and tear" not covered
- Violation: GA Code §33-6-37 (misrepresentation)
- Evidence: NWS tornado confirmation, engineering report
- Impact: Forced to hire public adjuster and attorney

#### **May 28, 2024 - Day 20 After Loss:**

- Event: Supervisor admits coverage but offers \$15,000 (actual damage \$202,500)
- Violation: GA Code §33-4-6 (bad faith offer)
- Evidence: Three contractor estimates averaging \$202,500
- Impact: Cannot begin repairs, additional damage occurring

#### **June 5, 2024 - Day 28 After Loss:**

- Event: Threatened policy non-renewal if claim pursued
- Violation: GA Code §33-6-40 (retaliation)
- Evidence: Email from underwriting department
- Impact: Coercion and intimidation

#### **June 10, 2024 - Day 33 After Loss:**

- Event: Company "loses" submitted documentation three times
- Violation: Pattern of obstruction
- Evidence: Certified mail receipts, email confirmations
- Impact: Deliberate delay tactics

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### **III. SPECIFIC REGULATORY VIOLATIONS**

#### **A. Unfair Claims Settlement Practices Act Violations**

##### **Georgia Insurance Code §33-6-34 - Unfair Claims Settlement Practices**

##### **1. §33-6-34(1) - Misrepresenting Policy Provisions**

- **Requirement:** Accurate representation of coverage
- **Violation:** Carrier falsely claimed wind damage was "wear and tear"
- **Evidence:** Policy clearly covers wind; NWS confirmed tornado
- **Pattern:** Similar misrepresentations on May 22, May 30, June 3

## 2. §33-6-34(2) - Failing to Acknowledge Claims Promptly

- **Requirement:** Acknowledge within 15 days
- **Violation:** No formal acknowledgment for 21 days
- **Evidence:** Certified mail receipts, call logs
- **Impact:** Delayed mitigation, increased damages

## 3. §33-6-34(3) - Failing to Adopt Reasonable Standards

- **Requirement:** Consistent claim processing standards
- **Violation:** Three different adjusters gave contradictory coverage positions
- **Evidence:** Adjuster #1 said covered, #2 said excluded, #3 said partial
- **Pattern:** No consistent standards evident

## 4. §33-6-34(4) - Failing to Affirm or Deny Coverage Promptly

- **Requirement:** Decision within 15 days of proof of loss
- **Violation:** No clear decision for 33 days and counting
- **Evidence:** Correspondence showing delays and contradictions
- **Bad Faith:** Delay appears intentional to pressure acceptance

## 5. §33-6-34(5) - Failing to Attempt Good Faith Settlement

- **Requirement:** Fair settlement when liability clear
- **Violation:** Offered \$15,000 for \$202,500 documented loss
- **Evidence:** Three estimates averaging \$202,500
- **Pattern:** Systematic undervaluation (92% below actual)

## 6. §33-6-34(6) - Compelling Litigation

- **Requirement:** Not forcing suit for obvious coverage
- **Violation:** Denying clearly covered tornado damage
- **Evidence:** Policy language, NWS reports, engineering report

- **Impact:** Forcing expensive litigation

## 7. §33-6-34(7) - Unreasonable Delay

- **Requirement:** Reasonable investigation time
- **Violation:** Pattern of unnecessary delays exceeding 30 days
- **Evidence:** Timeline shows repeated, intentional delays
- **Harm:** Additional damages, financial stress, medical impact

## 8. §33-6-34(8) - Inadequate Investigation

- **Requirement:** Reasonable investigation
- **Violation:** 12-minute inspection for major damage
- **Evidence:** Security footage, failed to enter attic or inspect properly
- **Bad Faith:** Outcome-oriented investigation

## 9. §33-6-34(9) - Failure to Provide Forms

- **Requirement:** Forms within 15 days
- **Violation:** Forms provided after 28 days
- **Evidence:** Written requests on May 9, 15, 20
- **Impact:** Delayed claim processing

## 10. §33-6-34(10) - Failure to Explain Denial

- **Requirement:** Written explanation with specifics
- **Violation:** Vague denial citing "policy exclusions" without specifics
- **Evidence:** Denial letter dated May 22
- **Bad Faith:** No legitimate basis provided

## B. Prompt Payment Statute Violations

### Georgia Insurance Code §33-4-6 - Prompt Payment of Claims

- **Requirement:** Payment within 60 days of agreement
- **Violation:** No payment after 38 days
- **Penalties Due:** 18% penalty plus interest
- **Evidence:** Supervisor admitted coverage May 28

## **C. Additional Statutory Violations**

### **Market Conduct Violations:**

- Pattern affecting multiple policyholders
- Systematic underpayment scheme
- Training deficiencies evident
- Corporate culture promoting violations

### **Consumer Protection Violations:**

- Deceptive practices
  - Unconscionable conduct
  - Unfair trade practices
  - Breach of public trust
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## **IV. EVIDENCE OF SYSTEMATIC MISCONDUCT**

### **Pattern Evidence**

#### **Similar Complaints:**

- DOI Complaint #GA-2024-11234 (wind claim denied)
- DOI Complaint #GA-2024-09876 (lowball offer)
- Online reviews showing pattern (178 similar complaints on BBB)
- Class action lawsuit: Thompson v. Premier National (pending)
- News article: "Premier National Under Fire" - Atlanta Journal, June 1, 2024

#### **Internal Evidence of Bad Faith:**

- Adjuster admitted being pressured to deny claims
- Supervisor overruled adjuster's coverage finding
- Company metrics favor denials (leaked memo attached)
- Bonus structure rewards claim denials

### **Specific Bad Faith Indicators**

#### **Economic Coercion:**

- Delayed payment to force acceptance
- "Take it or leave it" offer of \$15,000
- Threatened to close claim without payment
- Exploited financial vulnerability

#### **Litigation Abuse:**

- Forced litigation on clear coverage
  - Discovery abuse in prior cases
  - Vexatious litigation tactics
  - Economic superiority exploitation
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## **V. HARM AND DAMAGES**

### **Economic Harm**

#### **Quantifiable Losses:**

- Unpaid claim benefits: \$187,500
- Additional damage from delays: \$15,000
- Professional fees required: \$22,350
- Interest and financing costs: \$3,200
- Credit damage: Score dropped 85 points
- **Total Economic Harm: \$228,050**

### **Non-Economic Harm**

#### **Personal Impact:**

- Emotional distress requiring treatment (Dr. Williams, psychiatrist)
- Family relationship strain (spouse and children affected)
- Sleep disruption documented (sleep study attached)
- Anxiety and depression diagnosis
- Loss of trust in insurance system
- Hospitalization for stress-related condition (May 25, 2024)

#### **Societal Harm:**



- Undermines insurance regulation
  - Harms market competition
  - Increases costs for all consumers
  - Erodes public confidence
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## **VI. ATTEMPTS TO RESOLVE**

### **Direct Resolution Attempts**

#### **Communications with Carrier:**

1. May 10, 2024: Phone call to claims - Result: No callback
2. May 15, 2024: Email to supervisor - Result: Form response
3. May 22, 2024: Letter to management - Result: Denial letter
4. May 28, 2024: Executive complaint - Result: Insulting \$15,000 offer
5. June 5, 2024: CEO letter - Result: Threat of non-renewal

#### **All attempts unsuccessful due to:**

- Refusal to reconsider position
- No meaningful review conducted
- Same violations continued
- Bad faith evident throughout

### **Third Party Involvement**

#### **Public Adjuster:**

- Adjusters International, License #PA-2847
- Retained on May 23, 2024
- Carrier refused to meet with PA
- PA documentation ignored

#### **Attorney Consultation:**

- Consulted counsel on June 10, 2024
- Litigation being prepared
- Costs prohibitive for consumer

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## **VII. REGULATORY ACTION REQUESTED**

### **Immediate Actions Needed**

#### **1. Emergency Order (Within 48 Hours):**

- Order immediate cease and desist
- Require claim payment pending review
- Prevent claim file destruction
- Stop retaliatory non-renewal

#### **2. Investigation (Within 5 Days):**

- Assign senior investigator
- Request complete claim file
- Interview all involved personnel
- Review similar complaints

#### **3. Enforcement Actions (Within 30 Days):**

- Find violations occurred
- Order corrective action
- Impose maximum penalties
- Require restitution payment

### **Systemic Changes Required**

#### **Market Conduct Examination:**

- Comprehensive review of claim practices
- Analysis of denial/payment patterns
- Review of training programs
- Assessment of corporate culture

#### **Corrective Action Plan:**

- Reform claim handling procedures
- Retrain all claims personnel
- Implement compliance monitoring

- Regular reporting to Department

### **Sanctions and Penalties:**

- Maximum fines for each violation
  - Restitution to all affected policyholders
  - Suspension of writing new business
  - License revocation if pattern continues
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## **VIII. SIMILAR COMPLAINTS AND PATTERNS**

### **Research Conducted**

#### **NAIC Consumer Complaint Database:**

- Premier National complaint ratio: 3.8 (industry avg: 1.0)
- Similar complaints filed: 847 in last 12 months
- Complaint index ranking: 47th worst nationally

#### **Better Business Bureau:**

- Current rating: D-
- Complaints last 12 months: 312
- Pattern of issues: Claim denials, delays, lowball offers

#### **Online Reviews:**

- Google Reviews: 1.8/5.0 with 1,247 reviews
- Common complaints: Bad faith, delays, denials
- Pattern evident in 78% of reviews

#### **Legal Actions:**

- Pending class actions: 3 in Georgia alone
  - Recent verdict: \$2.8M bad faith (Johnson v. Premier)
  - Regulatory actions: Fined in FL, TX, CA
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## **IX. PUBLIC INTEREST FACTORS**

### **Why This Matters**

#### **Consumer Protection:**

- Vulnerable population affected (storm victims)
- Pattern suggests widespread harm
- Deterrence necessary
- Public trust at stake

#### **Market Impact:**

- Unfair competitive advantage
- Honest insurers disadvantaged
- Premium increases result
- Coverage availability affected

#### **Regulatory Integrity:**

- Laws must be enforced
  - Violations cannot be profitable
  - Department credibility important
  - Precedent for industry
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## **X. SUPPORTING DOCUMENTATION**

### **Attached Evidence**

#### **Organized in Following Tabs:**

##### **Tab A - Policy Documents:**

1. Complete insurance policy (47 pages)
2. Declarations pages
3. Endorsements and riders
4. Renewal notices
5. Premium payment proof

**Tab B - Claim Correspondence:**

1. Initial claim report
2. All letters to/from carrier (23 documents)
3. Email communications (87 emails)
4. Claim notes (obtained via attorney)
5. Denial/underpayment letters

**Tab C - Evidence of Loss:**

1. Photos of damage (147 images)
2. Video documentation (3 videos)
3. Professional estimates (3)
4. Engineering report (Dr. Peterson, PE)
5. Receipts and invoices (\$22,350)

**Tab D - Professional Documentation:**

1. Public adjuster report (18 pages)
2. Contractor estimates (3 detailed)
3. Engineer evaluation (stamped)
4. Code official letters
5. Mitigation invoices

**Tab E - Violation Evidence:**

1. Timeline with violations marked
2. Statutory provisions violated
3. Recording transcripts (3 calls)
4. Witness statements (4)
5. Pattern documentation

**Tab F - Impact Documentation:**

1. Medical records (stress hospitalization)
2. Financial impact evidence
3. Credit reports showing damage
4. Family impact statements

## **XI. DECLARATION AND CERTIFICATION**

### **Truthfulness Declaration**

I declare under penalty of perjury under the laws of Georgia that:

1. All information provided is true and correct
2. All documents are authentic
3. No material facts have been omitted
4. I will cooperate with investigation
5. I will provide additional information as needed

### **Authorization**

I authorize the Department to:

- Investigate this complaint fully
- Contact me for additional information
- Share information with law enforcement
- Coordinate with other state departments
- Take all necessary enforcement actions

### **Contact Preferences**

#### **Best Contact Method:**

- Primary Phone: (770) 555-7823 (Best times: 9 AM - 5 PM)
- Secondary Phone: (470) 555-7824
- Email: [sthompson.claims@email.com](mailto:sthompson.claims@email.com) (Checked hourly)
- Mailing Address: 4892 Pine Valley Drive, Alpharetta, GA 30009

#### **Special Accommodations Needed:**

- Medical condition requires low-stress communication
  - Prefer written communication when possible
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## XII. URGENCY FACTORS

### Why Immediate Action Required

#### Time-Sensitive Issues:

- Statute of limitations approaching: August 8, 2024
- Additional damage occurring daily (\$500/day)
- Financial hardship escalating
- Health impacts worsening
- Evidence at risk of destruction

#### Public Safety:

- Property unsafe without repairs
  - Mold growth creating health hazard
  - Structural dangers present
  - Code violations exist
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## XIII. CONCLUSION AND REQUEST

### Summary

Premier National Insurance Company's conduct in handling this claim exemplifies the worst practices in the insurance industry and demonstrates why strong regulatory enforcement is essential. The pattern of violations is clear, deliberate, and causing significant harm not just to me but likely to hundreds or thousands of other Georgia policyholders.

### Specific Relief Requested

I respectfully request the Commissioner:

1. **Immediately intervene** to stop ongoing harm
2. **Order payment** of all valid claims
3. **Investigate thoroughly** with subpoena power
4. **Impose maximum penalties** for violations
5. **Require systemic reforms** at Premier National
6. **Consider license actions** if warranted

7. **Refer for criminal prosecution** if fraud found
8. **Notify other states** of findings
9. **Issue public warning** about practices
10. **Provide restitution** to affected consumers

## **Final Statement**

The Department of Insurance exists to protect consumers from exactly this type of predatory conduct. Insurance is a promise—a promise that Premier National has broken repeatedly and deliberately. I trust the Department will take swift and decisive action to remedy these violations and prevent future harm to Georgia consumers.

I am available to provide any additional information, testify at hearings, or assist in the investigation in any way needed. Please confirm receipt of this complaint immediately and provide a complaint tracking number and expected timeline for investigation.

Thank you for your attention to this serious matter.

Respectfully submitted,

**Sarah Thompson**

June 15, 2024

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## **Copies Sent To:**

- Governor's Office of Consumer Affairs
  - Attorney General's Office - Consumer Protection Division
  - State Senator Jennifer Jordan - District 6
  - State Representative Sam Park - District 101
  - Premier National Insurance - CEO and Legal Department
  - NAIC - National Association of Insurance Commissioners
  - WSB-TV Consumer Investigator - pending outcome
  - Adjusters International - Public Adjuster
  - Peterson Law Firm - Attorney
  - File
-



# POST-COMPLAINT ACTIONS

## Immediate Follow-Up:

- Confirm receipt within 48 hours
- Calendar follow-up dates
- Document any retaliation
- Continue claim diary
- Save all new correspondence

## If No Response in 10 Days:

- Call Commissioner's office
- Contact state representatives
- Consider media involvement
- File federal complaints if applicable
- Engage attorney if necessary

## Track Resolution:

- Document all DOI communications
- Comply with all requests promptly
- Provide updates on new violations
- Track similar complaints online
- Consider class action if pattern shown

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*Note: This enhanced complaint template is comprehensive and designed to trigger serious regulatory review. It should be customized with specific facts and applicable state law citations. Consider having an attorney review before submission if the claim is substantial. Some states have specific complaint forms that must be used—this letter can supplement but not replace required forms. The Department of Insurance is a powerful ally when insurers violate the law, but complaints must be detailed and well-documented to trigger meaningful action.*