

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF NEW YORK

-----X

In the Matter of

the Ancillary Receivership of

ARROWOOD INDEMNITY COMPANY

-----X

Index No.: 450124/2024

**AFFIRMATION
IN SUPPORT OF THE
APPLICATION TO APPROVE
ADJUDICATION PROCEDURE**

Melissa A. Pisapia, an attorney at law, duly admitted to practice before the Courts of the State of New York, hereby affirms under the penalties of perjury under the laws of New York, which may include a fine or imprisonment, that the following is true, and that I understand that this document may be filed in an action or proceeding in a court of law.

1. I am an attorney employed by the New York Liquidation Bureau (“NYLB”), which serves as the staff of Adrienne A. Harris, Superintendent of Financial Services of the State of New York (“Superintendent”), in her capacity as ancillary receiver (“Ancillary Receiver”) of Arrowood Indemnity Company (“Arrowood”) and administrator (“Administrator”) of the New York Property/Casualty Insurance Security Fund (the “P/C Fund”). I submit this affirmation upon information and belief, the sources of which are the Arrowood files maintained by the NYLB and conversations I have had with staff of the Ancillary Receiver, in support of the Ancillary Receiver’s application for an order, substantially in the form of the proposed order annexed hereto as Exhibit A, to: (1) approve a procedure for judicial review of the Administrator’s adjudication of claims under Arrowood policies that are presented for payment from the P/C Fund in this proceeding (“Adjudication Procedure”); and (2) appoint a referee (“Referee”) to hear and take evidence on issues raised by claimants’ objections to the Administrator’s determinations, and to report thereon to this Court, which thereafter, on motion, may confirm or deny any decision issued by the Referee.

2. By order entered September 30, 2024, this Court, among other things, placed Arrowood into ancillary receivership and appointed the Superintendent as Ancillary Receiver, vesting the Superintendent with all powers and authority expressed or implied by Article 74 of the New York Insurance Law (“Insurance Law”). Insurance Law §§ 7401 et seq.

3. Because Arrowood is insolvent, claims under its insurance policies may be eligible for payment from the P/C Fund. The P/C Fund, which is funded by insurers operating in New York State, are reserves of money designed to ameliorate the impact of an insurer’s insolvency on policyholders by paying eligible claimants up to a policy’s limit or the statutory cap of \$1,000,000, whichever is less. Insurance Law §§ 7602(i), 7603(a)(2) and 7608(c); *In Re Reliance*, 35 A.D.3d 191 (1st Dept 2006) (noting that the Security Fund “was established by the Legislature to protect New York residents from the potentially devastating effects of insurance company failures”).¹

4. Claims potentially covered by the P/C Fund are referred to the Administrator, whose staff will determine fund coverage and either allow or deny the claim in whole or part. If the Administrator’s staff denies coverage for a claim, in whole or part, the claimant will receive a letter in substantially the form of the letter attached hereto as Exhibit B (“Denial Letter”) indicating the reason for the denial. If the Administrator determines there is fund coverage for a claim, but the Administrator and claimant have reached an impasse as to the value of such claim, a letter will be sent to the claimant in substantially the form attached hereto as Exhibit C (“Final Determination Letter”), indicating the final amount, if any, proposed to be paid to the claimant from the P/C Fund. The Denial Letter and Final Determination Letter all advise the claimant of the right to object and be heard by the Referee, who will hear and report to this Court on the

¹ The P/C Fund is administered by the Superintendent in her capacity as Administrator.

validity of the objection. The recommendation of the Referee is subject to judicial review by this Court upon a motion to confirm or deny the Referee's report.

THE ADJUDICATION PROCEDURE

5. The Ancillary Receiver proposes the following Adjudication Procedure:
 - A. This Adjudication Procedure applies to disputes arising out of the issuance of a Denial Letter or Final Determination Letter to a claimant.
 - B. References to "claimant" shall mean those individuals or entities with the legal standing to maintain a claim in this ancillary proceeding under an insurance policy issued by Arrowood. Nothing contained herein shall or shall be deemed to confer standing upon any individual or entity or expand any right of an individual or entity under applicable law or any provision of an insurance policy or contract.
 - C. Denial Letter.
 - i. The Administrator shall serve a Denial Letter on each claimant whose coverage for a claim is denied in whole or in part. Service of the Denial Letter will be made by First-Class Mail, or such other form of communication as may have been agreed to by the Administrator and the claimant in writing, to the claimant's last known address, and if a representative, such as an attorney or broker, submits a claim on a claimant's behalf, to the address of such representative. The Denial Letter may also be copied to such individuals or entities as may be required by law or as may be deemed advisable in the reasonable opinion of the Administrator.
 - ii. The Denial Letter shall advise each claimant of the following:
 - a. No further action by the claimant is required if the claimant accepts the Administrator's determination as set forth in the Denial Letter;
 - b. The claimant has the right to object to the Denial Letter, and can do so by serving a written objection with supporting documentation on the Administrator within sixty (60) days from the date of the Denial Letter, as set forth in the Denial Letter;
 - c. If the claimant makes a timely written objection, the Administrator will contact the claimant to attempt to resolve the objection. If the objection cannot be resolved and the claimant requests a hearing, the Administrator will contact the claimant and the Referee to initiate a pre-hearing conference. If the objection is not resolved, the Referee will set a date for a hearing;

- d. The Referee thereafter will hear and report on the validity of the claimant's objections;
- e. Either the claimant or the Administrator may move before this Court, on notice, for an order confirming or denying the Referee's report; and
- f. If the claimant fails to object within sixty (60) days from the date of the Denial Letter, the Administrator may deem the claim abandoned and may seek an *ex parte* order of this Court approving the denial of the claim.

D. Final Determination Letter.

- i. The Administrator shall serve a Final Determination Letter on each claimant where the Administrator has determined there is coverage for the claim, but the Administrator and claimant have, in the reasonable opinion of the Administrator, reached an impasse as to the value of such claim. Service of the Final Determination Letter will be made by First-Class Mail, or such other form of communication as may have been agreed to by the Administrator and the claimant in writing, to the claimant's last known address, and if a representative, such as an attorney or broker, submits a claim on a claimant's behalf, to the address of such representative. The Final Determination Letter may also be copied to such individuals or entities as may be required by law or as may be deemed advisable in the reasonable opinion of the Administrator.
- ii. The Final Determination Letter advises each claimant of the following:
 - a. If the claimant accepts the Administrator's valuation of the claim as set forth in the Final Determination Letter, the claimant may execute the settlement documents provided by the Administrator, including a release of further rights pertaining to the adjudicated claim, and return such documents to the Administrator;
 - b. If the claimant accepts the Administrator's valuation of the claim as set forth in the Final Determination Letter and returns the settlement documents within sixty (60) days from the date of the Final Determination Letter, application will be made to this Court to allow the claim in the amount specified in the Final Determination Letter or, in accordance with Insurance Law §§ 7428(b) and 7602(g), if the amount of the claim or the compromise between the Administrator's and the claimant's valuations of the claim does not exceed \$25,000, application will be made to the Superintendent to allow the claim in the amount specified in the Final Determination Letter and, upon such allowance, payment will be made as soon as reasonably practical;

- c. The claimant has the right to object to the Final Determination Letter, and may do so by serving a written objection with supporting documentation on the Administrator within sixty (60) days from the date of the Final Determination Letter, as set forth in the Final Determination Letter;
 - d. If the claimant makes a timely written objection, the Administrator will contact the claimant to attempt to resolve the objection. If the objection cannot be resolved and the claimant requests a hearing, the Administrator will contact the claimant and the Referee to initiate a pre-hearing conference. If the objection is not resolved, the Referee will set a date for a hearing;
 - e. The Referee will hear and report on the validity of the claimant's objections;
 - f. Either the claimant or the Administrator may move before this Court, on notice, for an order confirming or denying the Referee's report; and
 - g. If the claimant fails to object and fails to provide fully executed settlement documents within sixty (60) days from the date of the Final Determination Letter, the Administrator may deem the claim abandoned and may seek an *ex parte* order of this Court approving the denial of the claim.
- E. In the event that a claimant requests a hearing, the Administrator's staff will contact the claimant in writing at the address set forth on the Denial Letter or Final Determination Letter (or such other address as the claimant has provided to the Administrator in writing for the purpose of providing communications), as applicable, to schedule a pre-hearing conference. If the claimant fails to request an adjournment of the pre-hearing conference in writing at least five (5) business days prior to the pre-hearing conference and the claimant fails to attend such conference, then the claimant's objection is forfeited and the Denial Letter or Final Determination Letter is deemed accepted.
- F. In the event that a claimant fails to object to a Denial Letter or Final Determination Letter within the sixty (60) day period, the claim either shall be denied or allowed in the amount stated in the Denial Letter or Final Determination Letter, as applicable, subject to this Court's approval in accordance with Insurance Law §§ 7428(b) and 7602(g).
- G. If a claimant fails to take the steps necessary to have its objection heard, the Referee may issue a dismissal of the objection and deem the Denial Letter or Final Determination Letter to be accepted.
- H. The Administrator may settle objections in her sole discretion, at any time, without the necessity of receiving a report from the Referee; however, any

settlement or settlement compromise exceeding \$25,000 is subject to approval by this Court, in accordance with Insurance Law §§ 7428(b) and 7602(g).

- I. In the event the Administrator fails to timely meet any of the time periods set for mailing or delivering a notice required by order, it shall not affect the validity of the denial/determination but shall entitle the party that did not receive timely notice to toll its further obligations under the Adjudication Procedure until it receives the required notice.

THE APPOINTMENT OF A REFEREE

6. The Ancillary Receiver respectfully requests that this Court appoint the Referee to hear and take evidence on any issues or objections raised by claimants in accordance with the Adjudication Procedure, and to report the Referee's findings to this Court. Either the claimant or the Administrator may move before this Court, on notice, for an order confirming or denying the Referee's report.

7. The Ancillary Receiver respectfully requests that this Court appoint one person to serve as Referee. Having one person serve as Referee will ensure consistent recommendations regarding the issues and objections raised by claimants and will ensure that all claimants are treated equally.² In addition, to minimize administrative expenses, the Ancillary Receiver respectfully requests that the Referee be directed to conduct all hearings either virtually or in person at the place of business of the Superintendent as Administrator of the P/C Fund, currently located at 180 Maiden Lane in the Borough of Manhattan in the City, County and State of New York.

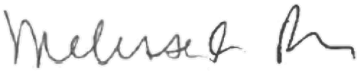
8. The Ancillary Receiver further respectfully requests that the Referee be paid an hourly rate of \$200 as a loss adjustment expense of the P/C Fund.

² If it would assist the Court, the Ancillary Receiver can provide a list of individuals serving as referees in other liquidation/ancillary receivership proceedings in New York County. If the Court would like to use such list to select a referee for this ancillary proceeding, please contact the undersigned and I will readily provide the list for the convenience of the Court.

9. There has been no previous application for the relief requested herein.

WHEREFORE, it is respectfully requested that this Court enter an order: (i) approving the Adjudication Procedure and granting the relief requested herein; (ii) appointing the Referee to hear and take evidence on issues raised by claimants' objections, and to report thereon to this Court, which thereafter, on motion, may confirm or deny any decision issued by the Referee; and (iii) granting the Ancillary Receiver such other and further relief as this Court may deem just and proper.

Dated: New York, New York
October 7, 2024



Melissa A. Pisapia

Exhibit A – Proposed Order

At IAS Part 16 of the Supreme Court of the State of New York, County of New York, at the Courthouse, 111 Centre Street, in the County, City and State of New York, on the ___ day of _____, 2024.

P R E S E N T:

HON. SHAHABUDEEN A. ALLY, J.S.C.

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF NEW YORK

-----X

In the Matter of

the Ancillary Receivership of

ARROWOOD INDEMNITY COMPANY.

-----X

Index No.: 450124/2024

**ORDER APPROVING THE
PROCEDURE FOR THE
SUPERINTENDENT’S
ADJUDICATION OF CLAIMS**

Upon the October 7, 2024, affirmation of Melissa A. Pisapia, an attorney with the New York Liquidation Bureau, which serves as the staff of Adrienne A. Harris, Superintendent of Financial Services of the State of New York, in her capacity as ancillary receiver (“Ancillary Receiver”) of Arrowood Indemnity Company (“Arrowood”) and administrator (“Administrator”) of the New York Property/Casualty Insurance Security Fund, for an order establishing adjudication procedure (“Adjudication Procedure”) in the above ancillary receivership proceeding and upon all other papers previously submitted and all proceedings heretofore had herein;

NOW, on motion of the Ancillary Receiver, and after due deliberation having been had thereon, it is

ORDERED, that the application is granted; and it is further ordered that

- 1. The Adjudication Procedure is approved.

2. The Adjudication Procedure is as follows:
- A. This Adjudication Procedure applies to disputes arising out of the issuance of a denial letter (“Denial Letter”) and a final determination letter (“Final Determination Letter”) to a claimant.
 - B. References to “claimant” shall mean those individuals or entities with the legal standing to maintain a claim in this ancillary proceeding under an insurance policy issued by Arrowood. Nothing contained herein shall or shall be deemed to confer standing upon any individual or entity or expand any right of an individual or entity under applicable law or any provision of an insurance policy or contract.
 - C. Denial Letter.
 - a) The Administrator shall serve a Denial Letter on each claimant whose coverage for a claim is denied in whole or in part. Service of the Denial Letter will be made by First-Class Mail, or such other form of communication as may have been agreed to by the Administrator and the claimant in writing, to the claimant’s last known address, and if a representative, such as an attorney or broker, submits a claim on a claimant’s behalf, to the address of such representative. The Denial Letter may also be copied to such individuals or entities as may be required by law or as may be deemed advisable in the reasonable opinion of the Administrator.
 - b) The Denial Letter shall advise each claimant of the following:
 - i) No further action by the claimant is required if the claimant accepts the Administrator’s determination as set forth in the Denial Letter;
 - ii) The claimant has the right to object to the Denial Letter, and can do so by serving a written objection with supporting documents on the Administrator within sixty (60) days from the date of the Denial Letter, as set forth in the Denial Letter;
 - iii) If the claimant makes a timely written objection, the Administrator will contact the claimant to attempt to resolve the objection. If the objection cannot be resolved and the claimant requests a hearing, the Administrator will contact the claimant and the court-appointed referee (“Referee”) to initiate a pre-hearing conference. If the objection is not resolved, the Referee will set a date for a hearing;
 - iv) The Referee thereafter will hear and report on the validity of the claimant’s objections;

- v) Either the claimant or the Administrator may move before this Court, on notice, for an order confirming or denying the Referee's report; and
- vi) If the claimant fails to object within sixty (60) days from the date of the Denial Letter, the Administrator may deem the claim abandoned and may seek an *ex parte* order of this Court approving the denial of the claim.

D. Final Determination Letter.

- a) The Administrator shall serve a Final Determination Letter on each claimant where the Administrator has determined there is coverage for the claim, but the Administrator and claimant have, in the reasonable opinion of the Administrator, reached an impasse as to the value of such claim. Service of the Final Determination Letter will be made by First-Class Mail, or such other form of communication as may have been agreed to by the Administrator and the claimant in writing, to the claimant's last known address, and if a representative, such as an attorney or broker, submits a claim on a claimant's behalf, to the address of such representative. The Final Determination Letter may also be copied to such individuals or entities as may be required by law or as may be deemed advisable in the reasonable opinion of the Administrator.
- b) The Final Determination Letter advises each claimant of the following:
 - i) If the claimant accepts the Administrator's valuation of the claim as set forth in the Final Determination Letter, the claimant may execute the settlement documents provided by the Administrator, including a release of further rights pertaining to the adjudicated claim, and return such documents to the Administrator;
 - ii) If the claimant accepts the Administrator's valuation of the claim as set forth in the Final Determination Letter and returns the settlement documents within sixty (60) days from the date of the Final Determination Letter, application will be made to this Court to allow the claim in the amount specified in the Final Determination Letter or, in accordance with New York Insurance Law ("Insurance Law") §§ 7428(b) and 7602(g), if the amount of the claim or the compromise between the Administrator's and the claimant's valuations of the claim does not exceed \$25,000, application will be made to the Superintendent to allow the claim in the amount specified in the Final Determination Letter and, upon such allowance, payment will be made as soon as reasonably practical;
 - iii) The claimant has the right to object to the Final Determination Letter, and may do so by serving a written objection with supporting documents

on the Administrator within sixty (60) days from the date of the Final Determination Letter, as set forth in the Final Determination Letter;

- iv) If the claimant makes a timely written objection, the Administrator will contact the claimant to attempt to resolve the objection. If the objection cannot be resolved and the claimant requests a hearing, the Administrator will contact the claimant and the Referee to initiate a pre-hearing conference. If the objection is not resolved, the Referee will set a date for a hearing;
 - v) The Referee thereafter will hear and report on the validity of the claimant's objections;
 - vi) Either the claimant or the Administrator may move before this Court, on notice, for an order confirming or denying the Referee's report; and
 - vii) If the claimant fails to object and fails to provide fully executed settlement documents within sixty (60) days from the date of the Final Determination Letter, the Administrator may deem the claim abandoned and may seek an *ex parte* order of this Court approving the denial of the claim.
- E. In the event that a claimant requests a hearing, the Administrator's staff will contact the claimant in writing at the address set forth on the Denial Letter or Final Determination Letter (or such other address as the claimant has provided to the Administrator in writing for the purpose of providing communications), as applicable, to schedule a pre-hearing conference. If the claimant fails to request an adjournment of the pre-hearing conference in writing at least five (5) business days prior to the pre-hearing conference and the claimant fails to attend such conference, then the claimant's objection is forfeited and the Denial Letter or Final Determination Letter is deemed accepted.
- F. In the event that a claimant fails to object to a Denial Letter or Final Determination Letter within the sixty (60) day period, the claim either shall be denied or allowed in the amount stated in the Denial Letter or Final Determination Letter, as applicable, subject to this Court's approval in accordance with Insurance Law §§ 7428(b) and 7602(g).
- G. If a claimant fails to take the steps necessary to have its objection heard, the Referee may issue a dismissal of the objection and deem the Denial Letter or Final Determination Letter to be accepted.
- H. The Administrator may settle objections in her sole discretion, at any time, without the necessity of receiving a report from the Referee; however, any settlement or settlement compromise exceeding \$25,000 is subject to approval by this Court, in accordance with Insurance Law §§ 7428(b) and 7602(g).

I. In the event the Administrator fails to timely meet any of the time periods set for mailing or delivering a notice required by order, it shall not affect the validity of the denial/determination but shall entitle the party that did not receive timely notice to toll its further obligations under the Adjudication Procedure until it receives the required notice.

3. Disputed claims and objections filed by claimants in the within proceeding that have not been settled or compromised are referred to:

NAME:

ADDRESS:

PHONE NO.:

as Referee to hear and take evidence on any issues or objections raised by claimants and report the Referee's findings to this Court.

4. The Referee shall be paid a fee based on an hourly rate of \$200 as a loss adjustment expense of the P/C Fund.

5. The Referee appointed to hear and report on objections shall conduct those hearings either virtually or in person at the place of business of the Administrator, currently located at 180 Maiden Lane, Borough of Manhattan, City, County and State of New York.

E N T E R

J. S. C.

Exhibit B – Notice of Denial



**New York
Liquidation Bureau**

ADRIENNE A. HARRIS
Superintendent of Financial
Services as Receiver

[Date]

First-Class Mail

[Insured or Insured’s representative]
[Address]

Re: Arrowood Indemnity Company in Ancillary Receivership
Claim Number:
Insured:
Policy Number:
Claimant:
Date of Loss:

Dear []:

The New York Liquidation Bureau serves as the staff of Adrienne A. Harris, Superintendent of Financial Services of the State of New York, in her capacity as Ancillary Receiver of Arrowood Indemnity Company (“Arrowood”) and in her capacity as Administrator of the New York Security Funds.

The claimant, [insert name], is alleging [insert brief statement of claim alleged and date of loss].

Arrowood insured [insert insured, insured location, specific vehicle, etc.] under [insert type] policy number [insert policy number] effective from [date] to [date].

The claimant’s claim is not covered by your Arrowood policy because [state reasons why not covered, specifying policy and/or statutory language, cancellation dates, etc., where necessary.]

[Choose Option 1 or Option 2]

Option 1.

In order for there to be coverage from the New York Property/Casualty Insurance Security Fund (“P/C Fund”), there first must be valid coverage under a policy. Because there is no policy coverage afforded to this loss, the P/C Fund will not cover the loss.

Therefore, the P/C Fund, will not defend, indemnify, or make any payments on [insert insured name] behalf regarding the above-captioned claim.

Option 2

[Other basis]

If you wish to make an objection to this denial, please submit your objection in accordance with the instructions set forth in the attached Notice of Denial within sixty (60) from of the date of this letter.

If you have any questions regarding this matter or other information for our review, please feel free to contact me 212-xxx-xxxx.

Very truly yours,

[Name]

[Title]

cc: [Insured if not addressee above]
[Legal representative for claimant]
[Claimant]

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF NEW YORK

-----X

Index No.: 450124/2024

In the Matter of

NOTICE OF DENIAL

the Ancillary Receivership of

ARROWOOD INDEMNITY
COMPANY.

-----X

Policy No.:
Claimant:
Claim No.:
Date of Loss:

Adrienne A. Harris, Superintendent of the Department of Financial Services of the State of New York as administrator (“Administrator”) of the New York Property/Casualty Insurance Security Fund hereby gives notice that the claim set forth above has been adjudicated and denied for the reason(s) stated in the accompanying disclaimer letter.

If you accept the Administrator’s determination, you are not required to take any further action.

If you object to the Administrator’s determination, you must set forth your objections and supporting reasons in writing and e-mail them to:

claims@nylb.org

All documents that support your objection must be provided to the Administrator with your objection. **Objections must be received by the Administrator within sixty (60) days from the date of this notice and accompanying letter.** If you fail to object within sixty (60) days from the date of this letter, the Administrator may deem the claim abandoned and may seek an order of the Court supervising the above proceeding denying the claim and discharging the New York Property/Casualty Insurance Security Fund from liability for such claim.

If you make a timely objection, the Administrator’s staff will contact you to attempt to resolve the objection. If the objection cannot be resolved, and you request a hearing, the Administrator will contact you and the court-appointed referee to initiate a pre-hearing conference. If the objection is not resolved, the referee will set a date for a hearing. The referee will hear and report on the validity of your objection to the Court supervising the above proceeding. Either you or the Administrator may move before this Court, on notice, for an order either confirming or denying the referee’s report.

If you have any questions regarding this Notice, you may contact [Examiner] at [telephone] or [email].

Dated:

New York, New York

Adrienne A. Harris
Superintendent of the Department of
Financial Services of the State of New York
as Ancillary Receiver of Arrowood Indemnity
Company

Exhibit C – Final Determination Letter

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF NEW YORK

-----X

In the Matter of

Index No.: 450124/2024

the Ancillary Receivership of

**FINAL
DETERMINATION
LETTER**

ARROWOOD INDEMNITY COMPANY.

-----X

Policy No.:

Claimant:

Claim No.:

Date of Loss:

Adrienne A. Harris, Superintendent of the Department of Financial Services of the State of New York (“Superintendent”) as administrator (“Administrator”) of the New York Property/Casualty Insurance Security Fund hereby gives notice that the claim set forth above has been adjudicated based upon the information obtained by the New York Liquidation Bureau and valued at the following amount:

\$

If you accept the Administrator’s determination, please sign and date the enclosed documentation, and return the fully signed documents to the New York Liquidation Bureau at the address below. Promptly upon receipt of fully signed documents, in the form attached, application will be made to the Court supervising the above proceeding or the Superintendent, as appropriate pursuant to section 7602(g) of the New York Insurance Law, for allowance. Provided allowance is granted, payment will be made in the amount above as soon thereafter as reasonably practical.

If you do not provide fully signed documents **within sixty (60) days** from the date of this letter, the Administrator may deem the claim abandoned and may seek an order of the Court supervising the above proceeding denying the claim and discharging the New York Property/Casualty Insurance Security Fund from liability for such claim.

If you object to the Administrator’s determination, you or your legal representative must set forth your objections in writing together with all documents supporting your written objections and e-mail the written objections and supporting documentation to:

claims@nylb.org

Objections must be received by the Administrator within sixty (60) days from the date of this notice.

If you make timely objection, the Administrator's staff will contact you to attempt to resolve the objection. If the objection cannot be resolved, and you requested a hearing, the Administrator will contact you and the court-appointed referee to initiate a pre-hearing conference. If the objection is not resolved, the referee will set a date for a hearing. The referee will hear and report to the Court supervising the above proceeding on the validity of your objection. Either you or the Administrator may move before this Court, on notice, for an order either confirming or denying the referee's report.

If you have any questions regarding this Notice, you may contact [Examiner] at [telephone] or [email].

Dated:
New York, New York

Adrienne A. Harris
Superintendent of the Department of
Financial Services of the State of New York
as Ancillary Receiver of Arrowood Indemnity
Company