

BEFORE THE INSURANCE COMMISSIONER OF THE  
STATE OF OKLAHOMA

STATE OF OKLAHOMA, ex rel. JOHN D. )  
DOAK, Insurance Commissioner, )  
Petitioner, )  
vs. )  
RICCARDIO MOFFETT, a licensed bail )  
bondsman in the State of Oklahoma, )  
AND )  
SAFETY NATIONAL CASUALTY )  
CORPORATION, a licensed insurance company )  
in the State of Oklahoma, )  
Respondents. )

CASE NO. 12-0131-DIS

**FILED™**

FEB 16 2012

INSURANCE COMMISSIONER  
OKLAHOMA

**CONDITIONAL ADMINISTRATIVE ORDER**  
**AND NOTICE OF RIGHT TO BE HEARD**

COMES NOW the State of Oklahoma, ex rel., John D. Doak, Insurance Commissioner, by and through counsel and alleges and states as follows:

**JURISDICTION**

1. John D. Doak is the Insurance Commissioner of the State of Oklahoma and as such is charged with the duty of administering and enforcing all provisions of the Oklahoma Insurance Code 36 O.S. §§ 101-7004 and the Oklahoma Bail Bond Act 59 O. S. §§ 1301-1340.

2. Respondent Riccardio Moffett (“Moffett”) is a licensed bail bondsman in the State of Oklahoma holding license number 199986.

3. Respondent Safety National Casualty Corporation (“Safety National”) is a licensed insurance company in the State of Oklahoma holding license number 15105.

**FINDINGS**

1. On or about August 12, 2011, an appearance bond was executed as follows:

Defendant:	Daniel Lee Dolezal
Case Number(s):	CF-2009-5007
City/County:	Oklahoma County

Surety:	Safety National Casualty Corporation
Bondsman:	Riccardo Moffett
Power Number(s):	S5-2018245
Bond Amount(s):	\$2,000

2. On September 6, 2011, the Defendant failed to appear, and the bond was declared forfeited. An Order and Judgment of Forfeiture was issued by the court on September 30, 2011 and filed in the case. A true and correct copy of the Order and Judgment of Forfeiture was mailed to Respondents with return receipt requested within thirty (30) days after the forfeiture.

3. Moffett received a copy of the Order and Judgment of Forfeiture on October 5, 2011.

4. Safety National received a copy of the Order and Judgment of Forfeiture on October 4, 2011.

5. The ninety-first (91<sup>st</sup>) day after receipt of the Order and Judgment of Forfeiture by Respondents was January 4, 2012. Defendant was not returned to custody within ninety (90) days of receipt of the Order and Judgment of Forfeiture, nor was deposit in the face amount of the bail bond made to the court clerk on the ninety-first (91<sup>st</sup>) day.

6. The bond was paid on January 5, 2012.

#### **CONCLUSIONS OF LAW**

The allegations are found to be true and correct, and Respondents have violated 59 O.S. § 1332 by failing to return the defendant within ninety (90) days or remit payment in the face amount of the bond forfeiture within ninety-one (91) days from receipt of the Order and Judgment of Forfeiture. Any bail bondsman or bail surety violating any provision of the Bail Bond Act “may be subject to a civil penalty of not less than Two Hundred Fifty Dollars (\$250.00) nor more than Two Thousand Five Hundred Dollars (\$2,500.00) for each occurrence.” 59 O.S. § 1310(B).

**ORDER**

**IT IS THEREFORE ORDERED that Riccardio Moffett and Safety National are each fined Two Hundred Fifty Dollars (\$250.00).**

Respondents are further notified that they may request a hearing within 30 days of the receipt of this Order concerning this action, and upon such request, the Oklahoma Insurance Department shall conduct a hearing before an independent hearing examiner. A request for hearing shall be made in writing to Michael P. Copeland, Oklahoma Insurance Department, Legal Division, 3625 NW 56<sup>th</sup> Suite 100, Oklahoma City, Oklahoma 73112 and **give an explanation of Respondents' actions described herein and any defenses thereto.**

**If Respondents do not request a hearing within the 30 days allotted, this Order shall become a FINAL ORDER on the 31<sup>st</sup> day following the receipt of the Order and the fines ordered herein shall be due.**

WITNESS My Hand and Official Seal this 14 day of February, 2012.

JOHN D. DOAK  
INSURANCE COMMISSIONER  
STATE OF OKLAHOMA



  
Michael P. Copeland  
Assistant General Counsel  
3625 NW 56<sup>th</sup> Street, Suite 100  
Oklahoma City, Oklahoma, 73112  
Tel. (405) 521-2746  
Fax (405) 521-0125

**CERTIFICATE OF SERVICE**

I hereby certify that a true and correct copy of the above and foregoing *Conditional Administrative Order and Notice of Right to Be Heard* was mailed certified, return receipt requested, on this 16<sup>th</sup> day of February, 2012, to:

Riccardo Moffett  
P.O. Box 94396  
Oklahoma City, OK 73143-4396

Safety National Casualty Corporation  
1832 Schuetz Road  
St. Louis, MO 63146-3540

  
\_\_\_\_\_  
Michael P. Copeland

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Postmark Here  
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Sent To: Safety National Casualty Corporation  
 1832 Schuetz Rd.  
 St. Louis, MO 63146-3540  
 sms/12-0131-DIS/Cond. Ord.

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>X <i>Joe Bauer</i></p> <p>B. Received by (Printed Name) <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p><i>Joe Bauer</i> FEB 2 - 2012</p> <p>RECEIVED OKLAHOMA INSURANCE DEPARTMENT              FEB 24 2012              Legal Division</p> <p>Is delivery address different from item 1? <input type="checkbox"/> Yes              If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Safety National Casualty Corporation              1832 Schuetz Rd.              St. Louis, MO 63146-3540              sms/12-0131-DIS/Cond. Ord.</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p>	<p>7006 2760 0005 6605 5393</p>
PS Form 3811, February 2004	Domestic Return Receipt 102595-02-M-1540

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Sent To  
 Riccardo Moffett  
 P.O. Box 94396  
 OKC, OK 73143-4396  
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Postmark Here  
 FEB 16 2012

MARTIN LUTHER KING JR. STATION  
 OKC OK 731

PS Form 3800, August 2006 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

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- Print your name and address on the reverse so that we can return the card to you.
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2. Article Number  
 (Transfer from service label)

7006 2760 0005 6605 5386

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee

B. Received by (Printed Name)  
 Riccardo Moffett

C. Date of Delivery  
 3/1/12

delivery address different from item 1?  Yes  
 No

OKLAHOMA INSURANCE DEPARTMENT

MAR 02 2012

MAR -1 2012

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes