

**BEFORE THE INSURANCE COMMISSIONER OF THE
STATE OF OKLAHOMA**

FILED

DEC 02 2013

INSURANCE COMMISSIONER
OKLAHOMA

STATE OF OKLAHOMA, ex rel. JOHN D.)
DOAK, Insurance Commissioner,)
Petitioner,)
vs.)
RICO PETERSON, a licensed bail bondsman in)
the State of Oklahoma,)
AND)
UNITED STATE FIRE INSURANCE)
COMPANY, an insurance company licensed to act)
as bail surety in the State of Oklahoma,)
Respondents.)

CASE NO. 13-1214-DIS

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. §§ 101-7301, and the Oklahoma Bail Bond Act, 59 O. S. §§ 1301-1340.
2. Respondent Rico Peterson (“Peterson”) is a licensed bail bondsman in the State of Oklahoma holding license number 100135841.
3. Respondent United States Fire Insurance Company (“USFIC”) is an insurance company licensed to act as bail surety in the State of Oklahoma holding NAIC number 21113.

FINDINGS

1. On or about November 9, 2012, an appearance bond was executed as follows:

Defendant:	Shakresha Dawn Boyd
Case Number(s):	CM-2010-663
City/County:	Logan County
Surety:	United States Fire Insurance Company
Bondsman:	Rico Peterson
Power Number(s):	U5-20424217
Bond Amount(s):	\$4,000

2. On July 12, 2013, the Defendant failed to appear, and the bond was declared forfeited. An Order and Judgment of Forfeiture was filed in the case on August 7, 2013. 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 filing of the Order and Judgment of Forfeiture.

3. The certified mailing to Peterson, although addressed to his proper mailing address, was returned to the Logan County Court Clerk as "Unclaimed."

4. USFIC received a copy of the Order and Judgment of Forfeiture on August 9, 2013.

5. The ninety-first (91st) day after receipt of the Order and Judgment of Forfeiture by Respondents was Friday, November 8, 2013.

6. The Defendant was not returned to custody within 90 days, nor was the face amount of the forfeited bond deposited with the Court Clerk within 91 days after receipt of the Order and Judgment of Forfeiture by Respondents.

7. As of the date of this Order, the bond forfeiture has not been paid or otherwise set aside or the bond exonerated.

CONCLUSIONS OF LAW

1. 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.

2. Pursuant to 59 O.S. § 1310(B), any bondsman or company violating a provision of the Bail Bond Act, 59 O.S. §§ 1301-1340, may be subject to a fine of not less than \$250 but not more than \$2,500.

3. Pursuant to 59 O.S. § 1332(D)(4)(a), when a surety company does not properly deposit with the court clerk the face amount of the forfeited bond, the Commissioner shall “cancel the license privilege and authorization of the insurer to do business within the State of Oklahoma and cancel the surety appointment of all surety bondsman agents of the insurer.”

ORDER

IT IS THEREFORE ORDERED that United States Fire Insurance Company and Rico Peterson are each **CENSURED** and **FINED** Four Hundred Dollars (\$400.00).

IT IS FURTHER ORDERED that the face amount of the bond forfeiture shall be deposited with the Logan County Court Clerk (or the bond forfeiture otherwise set aside and the bond exonerated) within thirty (30) days of receipt of this Order. Failure to do so shall result in the **CANCELLATION** of United States Fire Insurance Company’s license privilege and authorization to do business within the State of Oklahoma and the **CANCELLATION** of the surety appointment of all surety bondsman agents of United States Fire Insurance Company.

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 Buddy Combs, Oklahoma Insurance Department, Legal Division, 3625 NW 56th Suite 100, Oklahoma City, Oklahoma 73112 and **give an explanation of Respondents’ actions alleged**

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 31st day following the receipt of the Order, and the fines ordered herein shall be due.

WITNESS My Hand and Official Seal this 2nd day of December, 2013.



JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA

A handwritten signature in cursive script, reading "Wm Combs", written over a horizontal line.

William G. "Buddy" Combs
Assistant General Counsel
3625 NW 56th Street, Suite 100
Oklahoma City, Oklahoma, 73112
Tel. (405) 521-2746
Fax (405) 522-0125

CERTIFICATE OF MAILING

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 2nd day of December, 2013, to:

Rico Peterson
PO BOX 245
CHANDLER, OK 74834-0245

United States Fire Insurance Company
Attn: Legal Division
305 MADISON AVE.
MORRISTOWN, NJ 07962

A handwritten signature in cursive script, reading "Wm Combs", written over a horizontal line.
William G. "Buddy" Combs

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	



Total Postage

Sent To: Rico Peterson
 P.O. Box 245
 Chandler, OK 74834-0245
 sms/13-1214-DIS/Cond Ord

Street, Apt. No. or PO Box No.
 City, State, ZIP

PS Form 3800, January 2001 See Reverse for Instructions

9492 6424 4000 02E0 1002



JOHN D. DOAK
Insurance Commissioner
 Oklahoma Insurance Department
 5 Corporate Plaza
 3625 N.W. 56th St., Ste. #100
 Oklahoma City, OK 73112-4511

CERTIFIED MAIL



7001 0320 0004 4249 2646

Rico Peterson
 P.O. Box 245
 Chandler, OK 74834-0245

neopost
 12/02/2013
US POSTAGE \$006.77
 FIRST-CLASS MAIL
 ZIP 73112
 041L12203132

1st
 2nd
 Return
 DEC - 3 2013
 DEC 3 2013

73112 04511
 NIXIE 731 15 1700 9001/05/14
 RETURN TO SENDER
 UNCLAIMED
 UNABLE TO FORWARD
 BC: 73112451125 *1057-13524-02-36

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE



9492 6424 4000 0220 1002

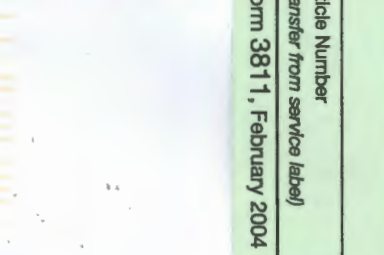
Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage	

Sent To

Rico Peterson
P.O. Box 245
Chandler, OK 74834-0245
sms/13-1214-DIS/Cond Ord

Street, Apt. No. or PO Box No.
City, State, Zip

PS Form 3811, January 2001 See Reverse for Instructions



Article Number
(Transfer from service label)

7001 0320 0004 4249 2646

Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

Rico Peterson
P.O. Box 245
Chandler, OK 74834-0245
sms/13-1214-DIS/Cond Ord

Article Addressed to:

JAN 09 2014
Legal Division

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse **RECEIVED** so that we can return the card to you.
- Attach this card to the back of the envelope, or on the front if space permits.

COMPLETE THIS SECTION ON DELIVERY

A. Signature _____ Agent

B. Received by (Printed Name) _____ Addressee

C. Date of Delivery _____ Yes

D. Is delivery address different from item 1? No

If YES, enter delivery address below: _____

3. Service Type

Certified Mail Express Mail

Registered Return Receipt for Merchandise

Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

7001 0320 0004 4249 2639

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	



Total Postage United States Fire Insurance Company
 Sent To Attn: Legal Division
 305 Madison Ave.
 Street, Apt. No. or PO Box No. Morristown, NJ 07962
 City, State, ZIP sms/13-1214-DIS/Cond Ord

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

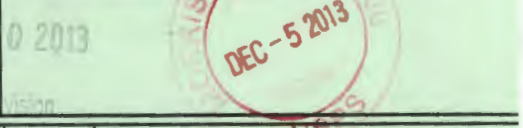
United States Fire Insurance Company
 Attn: Legal Division
 305 Madison Ave.
 Morristown, NJ 07962
 sms/13-1214-DIS/Cond Ord

2. Article Number
 (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
 X *[Signature]*
 B. Received by (Printed Name) *[Signature]* C. Date of Delivery

D. Is delivery address different from item 1? Yes
 No
 If YES, enter delivery address below:



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

4. Restricted Delivery? (Extra Fee) Yes