

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

FILED

JAN 03 2014

INSURANCE COMMISSIONER
OKLAHOMA

STATE OF OKLAHOMA, ex rel. JOHN D.)
DOAK, Insurance Commissioner,)
)
Petitioner,)
)
vs.)
)
SCOTT DARK, a licensed bail bondsman in the)
State of Oklahoma,)
)
Respondent.)

Case No. 13-1247-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 Scott Dark ("Respondent") is a licensed bail bondsman in the State of Oklahoma holding license number 40084925.

FINDINGS OF FACT

1. Respondent submitted his January 2013 United States Fire Insurance Company ("USFIC") report late on February 21, 2013. The report was due February 15, 2013.

2. Respondent submitted his June 2013 USFIC report late on July 16, 2013. The report was due July 15, 2013.

3. Respondent submitted his October 2013 USFIC report late on November 22, 2013.

The report was due November 15, 2013.

CONCLUSIONS OF LAW

1. Respondent has violated 59 O.S. § 1310(A)(22) for failing to file a report as required by 59 O.S. § 1314.
2. Respondent has violated 59 O.S. § 1314(B), which states that “monthly reports shall be submitted electronically to the Insurance Commissioner by the fifteenth day of each month.”
3. Pursuant to 59 O.S. § 1310(B), “any person violating any provision of Sections 1301 through 1340 of this title 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.”

ORDER

IT IS THEREFORE ORDERED that Scott Dark is CENSURED and FINED Two Hundred Fifty Dollars (\$250.00).

Respondent is further notified that he 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 St., Suite 100, Oklahoma City, Oklahoma 73112, and **state the basis for requesting the hearing.**

If Respondent does 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. Any fine

ordered herein shall be due within 30 days after the date this Order becomes a Final Order.

WITNESS My Hand and Official Seal this 3rd day of January 2014 ~~December, 2013~~.



JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA

Wm Combs

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 3rd day of ~~December, 2013~~, to:

January, 2014

Scott Dark
PO BOX 647
PERRY, OK 73077-0647

Wm Combs

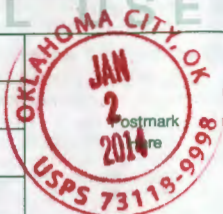
William G. "Buddy" Combs

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: **Scott Dark**
P.O. Box 647
Perry, OK 73077-0647
sms/13-1247-DIS/Cond. Ord.

PS Form 3800, January 2001 See Reverse for Instructions



5 Corporate Plaza
 3625 N.W. 56th St., Ste. #100
 Oklahoma City, OK 73112-4511

CERTIFIED MAIL



7001 0320 0004 4249 2158

neopost FIRST-CLASS MAIL
 01/03/2014
US POSTAGE \$006.57



ZIP 73112
 041L12203132

UNCLAIMED



Scott Dark
 P.O. Box 647
 Perry, OK 73077-0647

RECEIVED
 OKLAHOMA INSURANCE DEPARTMENT

JAN 28 2014

Legal Division

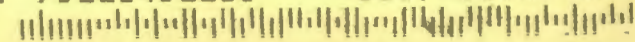
14
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NIXIE 731 DE 1700 0001/24/14

RETURN TO SENDER
 UNCLAIMED
 UNABLE TO FORWARD

BC: 73112451125 *0657-08992-03-41

73112@4511



7001 0320 0004 4249 2158

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Postage \$

Certified Fee

Return Receipt Fee
(Endorsement Required)

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(Endorsement Required)

Total Postage

Sent To

Street, Apt. #
or PO Box No.

City, State, Z

Scott Dark

P.O. Box 647

Perry, OK 73077-0647

sms/13-1247-DIS/Cond. Ord.



PS Form 3800, January 2004

See Reverse for Instructions

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:

Scott Dark
P.O. Box 647
Perry, OK 73077-0647
sms/13-1247-DIS/Cond. Ord.

2. Article Number

(Transfer from service label)

7001 0320 0004 4249 2158

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

3. Service Type

Certified Mail Express Mail

Registered Return Receipt for Merchandise

Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes