BEFORE THE INSURANCE COMMISSIONER OF THE STATE OF OKLAHOMA

| to 100 | | |
|--------|----|-----|
| 11 11 | | - |
| 10 10 | 4 | 1 B |
| 11 15 | | 10 |
| | IL | ILF |

| STATE OF OKLAHOMA, ex rel. JOHN D. DOAK, Insurance Commissioner, | MAR 07 2014 |
|--|---------------------------------|
| Petitioner, | INSURANCE COMMISSIONER OKLAHOMA |
| VS. |) |
| |) Case No. 14-0125-DIS |
| JAMES LANG, a licensed bail bondsman in the |) |
| State of Oklahoma, |) |
| |) |
| Respondent. |) |

AMENDED 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, Dan R. Byrd, 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. James Lang ("Respondent") is a licensed bail bondsman in the State of Oklahoma holding license number 199299.

FINDINGS OF FACT

- 1. Every bail bondsman license expires biennially at 12:00 midnight on the last day of the bondsman's birth month. 59 O.S. § 1304.
- 2. Every bondsman is required to renew his or her license biennially by submitting a completed renewal application by the end of his or her birth month. 59 O.S. § 1309.
 - 3. Approximately forty-five days prior to the expiration of a bondsman's license,

Oklahoma Insurance Department ("OID") staff sends an E-mail to the bondsman advising of the license expiration date.

- Respondent's birth month is November. Accordingly, his license expired at midnight,
 November 30, 2013.
 - 5. On January 15, 2014, Respondent renewed his license.
- 6. OID personnel conducts audits of late renewals to determine if bondsmen execute any bonds during periods they were not licensed. Investigation of bonds executed in the county and municipality in which Respondent operates revealed that, during the unlicensed period, Respondent executed seven (7) appearance bonds. These bonds totaled \$5,770.00.

CONCLUSIONS OF LAW

1. The allegations are found to be true and correct and Respondent has violated 59 O.S. §§ 1303(A) and 1320(A), and Oklahoma Administrative Code 365:25-5-35(E) by executing bail bonds in Oklahoma without a valid Oklahoma bail bond license.

ORDER

IT IS THEREFORE ORDERED that James Lang is hereby CENSURED.

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 Dan R. Byrd, Oklahoma Insurance Department, Legal Division, 3625 NW 56th St., Suite 100, Oklahoma City, Oklahoma 73112, and **provide an explanation of Respondent's actions described herein and any defenses thereto**.

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.

WITNESS My Hand and Official Seal this ____ day of March, 2014.



JOHN D. DOAK INSURANCE COMMISSIONER STATE OF OKLAHOMA

Dan R. Byrd Assistant General Counsel 3625 NW 56th Street, Suite 100 Oklahoma City, Oklahoma, 73112 Tel. (405) 522-6330 Fax (405) 522-0125

CERTIFICATE OF MAILING

I, Dan R. Byrd, 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 via certified mail with return receipt requested on this _____ day of March, 2014, to:

James Lang 211 W. Main St. Marietta, OK 73448-2833

Dan R. Byrd



| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY |
|--|---|
| 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 mailplece, or on the front if space permits. RECEIVED 1. Article Addressed to: OKLAHOMA INSURANCE James Lang MAR 12 | A signature X Addressee B. Received by (Printed Name) C. Date of Delivery ANG D. Is delivery address different from Item 1? Pes DEPARTS, enter delivery address below: No |
| 211 W. Main St. Marietta, OK 73448-2833 sms/14-0125-DIS/Cond Ord | 3. Service Type Certified Mail |
| | 4. Restricted Delivery? (Extra Fee) Yes |
| 2. Article Number (Transfer from service label) 7 0 0 1 0 3 2 0 | 0004 4248 5389 |
| PS Form 3811, February 2004 Domestic Retu | rm Receipt 102595-02-M-1540 |