

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

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

FILED

APR 28 2014

INSURANCE COMMISSIONER
OKLAHOMA

CASE NO. 14-0408-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 John Adams (“Adams”) is a licensed bail bondsman in the State of Oklahoma holding license number 40001409.
3. Respondent Seneca Insurance Company, Inc. (“SICI”) is an insurance company licensed to act as bail surety in the State of Oklahoma holding NAIC number 10936.

FINDINGS OF FACT

1. On or about September 18, 2013, appearance bonds were executed as follows:

Defendant:	Kenneth Vance Morton
Case Number(s):	403326, 403326A, 403326B
City/County:	Tulsa Municipal Criminal Court
Surety:	SICI
Bondsman:	John Adams
Power Number(s):	S10-2077704, S10-2077703, S10-2047951
Bond Amount(s):	\$750, \$300, \$150 = \$1200

2. On November 27, 2013, the Defendant failed to appear, and the bonds were orally declared forfeited. An Order and Judgment of Forfeiture was filed by the court on December 12, 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 Order's filing.

3. Adams's copy of the Order and Judgment of Forfeitures was per USPS, Return to Sender, Attempted Not Known, Unable to Forward.

4. SICI received a copy of the Order and Judgment of Forfeitures on December 16, 2013.

5. The ninetieth (90th) day after receipt of the Order and Judgment of Forfeitures by Respondents was Monday, March 17, 2014.

6. The ninety-first (91st) day after receipt of the Order and Judgment of Forfeitures by Respondents was Monday, March 17, 2014.

7. As of the date of this Order, the bond forfeitures have not been paid or otherwise set aside or the bonds exonerated.

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

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 forfeitures 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.

ORDER

IT IS THEREFORE ORDERED that John Adams and Seneca Insurance Company, Inc. are **each CENSURED and FINED Two Hundred Fifty Dollars (\$250.00)**.

IT IS FURTHER ORDERED that the face amount of the bond forfeitures shall be deposited with the Tulsa Municipal Criminal Court Clerk (or the bond forfeitures otherwise set aside or the bonds exonerated) within thirty (30) days of receipt of this Order. Failure to do so shall result in the **CANCELLATION** of Seneca Insurance Company, Inc.'s license privilege and authorization to do business within the State of Oklahoma and **CANCELLATION** of the surety appointment of all surety bondsman agents of Seneca Insurance Company, Inc.

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 28th day of April, 2014.



JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA

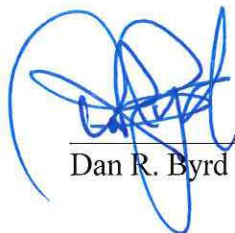
Dan R. Byrd
Assistant General Counsel
3625 NW 56th Street, Suite 100
Oklahoma City, Oklahoma, 73112
Tel. (405) 522-6330
Fax (405) 522-0125

CERTIFICATE OF MAILING

I 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 28th day of April, 2014, to:

John Adams
4616 E. 11th St.
Tulsa, Oklahoma 74112-4214

Seneca Insurance Company, Inc.
157 Main Street
P.O. Box 806
Greenville, Pennsylvania 16125



Dan R. Byrd

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

7001 0320 0004 4248 4634

OFFICIAL



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

Total Postage

Sent To: **Seneca Insurance Company, Inc.**
 157 Main Street
 P.O. Box 806
 Greenville, PA 16125
 sms/14-0408-DIS/Cond Ord

Sent To: _____
 Street, Apt. No. or PO Box No. _____
 City, State, ZIP _____

PS Form 3800, January 2007 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:

Seneca Insurance Company, Inc.
 157 Main Street
 P.O. Box 806
 Greenville, PA 16125
 sms/14-0408-DIS/Cond Ord

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 X *George Macko* Addressee

B. Received By (Printed Name) **GEORGE MACKO** C. Date of Delivery **MAY - 1 2014**

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

RECEIVED
 OKLAHOMA INSURANCE DEPARTMENT
 MAY 06 2014
 Legal Division

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

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Transfer from service label) **7001 0320 0004 4248 4634**

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)	

John Adams

4616 E. 11st Street
Tulsa, OK 74112-4214

sms/14-0408-DIS/Cond Ord

Total Postage

Sent To
Street, Apt.
or PO Box #
City, State, ZIP

PS Form 3800, January 2001

CERTIFIED MAIL



7001 0320 0004 4248 4627

229h 842h 4000 02E0 7002
Oklahoma City, OK 73112-4511

neopost
04/28/2014
US POSTAGE \$007.19⁰

FIRST-CLASS MAIL



ZIP 73112
041L12203132

RECEIVED
OKLAHOMA INSURANCE DEPARTMENT

MAY 06 2014

Legal Division



John Adams
4616 E. 11st Street
Tulsa, OK 74112-4214

M L N E

NIXIE 731 DE 1700 0005/03/14

RETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD

BC: 73112451125 *2457-03076-03-13

73112@4511

Postage and Fees Paid by Addressee

OFFICIAL USE



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

John Adams
 4616 E. 11st Street
 Tulsa, OK 74112-4214
sms/14-0408-DIS/Cond Ord

Total Posts _____
 Sent To _____
 Street, Apt _____
 or PO Box A _____
 City, State _____

PS Form 3800, January 2001
 See Reverse for Instructions

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

7001 0320 0004 4248 4627

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:

John Adams
 4616 E. 11st Street
 Tulsa, OK 74112-4214
sms/14-0408-DIS/Cond Ord

2. Article Number

(Transfer from service label)

7001 0320 0004 4248 4627

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