

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

STATE OF OKLAHOMA, ex rel. JOHN D. DOAK, Insurance Commissioner,)
Petitioner,)
vs.)
PHILLIP EGGENBERG, 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.)

CASE NO. 14-0606-DIS

FILED

JUN 13 2014

**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. §§ 101-7301, and the Oklahoma Bail Bond Act, 59 O. S. §§ 1301-1340.

2. Respondent Phillip Eggenberg ("Eggenberg") is a licensed bail bondsman in the State of Oklahoma holding license number 199952.

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 860218.

FINDINGS OF FACT

1. On or about August 8, 2013, an appearance bond was executed as follows:

Defendant: Andy Jose Vides
Case Number(s): CF-2009-222
City/County: Garvin County
Surety: Seneca Insurance Company, Inc.
Bondsman: Phillip Eggenberg
Power Number(s): S05 02073336
Bond Amount(s): \$2000

2. On January 3, 2014, the Defendant failed to appear, and the bond was orally declared forfeited. An Order and Judgment of Forfeiture was filed by the court on January 22, 2014. 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. Eggenberg received a copy of the Order and Judgment of Forfeiture February 20, 2014.

4. SICI's Order and Judgment of Forfeiture had no received date of USPS green card.

5. The ninetieth (90th) day after receipt of the Order and Judgment of Forfeiture by Respondents was Wednesday, May 21, 2014.

6. The ninety-first (91st) day after receipt of the Order and Judgment of Forfeiture by Respondents was Thursday, May 22, 2014.

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

8. 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.

CONCLUSIONS OF LAW

1. The allegations are found to be true and correct, and Respondents have violated 59 O.S. § 1332(D) 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 Phillip Eggenberg 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 forfeiture shall be deposited with the Oklahoma County Court Clerk (or the bond forfeiture otherwise set aside or the bond 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.

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 Dan R. Byrd, Assistant General Counsel, 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 13th day of June, 2014.



JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA

A handwritten signature in blue ink, appearing to read "Dan R. Byrd", is written over a horizontal line. A blue circular scribble is present to the left of the signature.

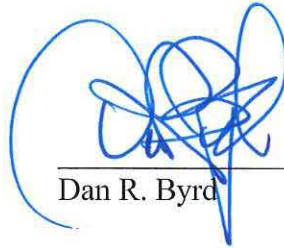
Dan R. Byrd
Assistant General Counsel
3625 NW 56th Street, Suite 100
Oklahoma City, Oklahoma, 73112
Tel. (405) 522-6330
Fax (405) 522-0125

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 13th day of June, 2014, to:

Phillip Eggenberg
220 Lake Murray Dr.
Ardmore, OK 73401

Seneca Insurance Company, Inc.
160 Water Street, 16th Floor
New York, NY 10038



Dan R. Byrd

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

7001 0320 0004 4248 1442

OFFICIAL USE

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



Total Postage Seneca Insurance Co., Inc.
 Sent To 160 Water Street, 16th Floor
 Street, Apt. No., or PO Box No. New York, NY 10038
 City, State, ZIP+ sms/14-0606-DIS/Cond Ord

PS Form 3800, January 2007 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> 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. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>RECEIVED OKLAHOMA INSURANCE DEPARTMENT JUL 15 2014 Legal Division</p>
<p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; margin: 10px;"> Seneca Insurance Co., Inc. 160 Water Street, 16th Floor New York, NY 10038 sms/14-0606-DIS/Cond Ord </div>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>2. Article Number (Transfer from service label)</p>	<p>3. Service Type</p> <p><input checked="" 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>7001 0320 0004 4248 1442</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>PS Form 3811, February 2004</p>	<p>Domestic Return Receipt 102595-02-M-1540</p>

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

7001 0320 0004 4248 1459

OFFICIAL USE

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

Sent To
 Phillip Eggenberg
 220 Lake Murray Dr.
 Ardmore, OK 73401
 sms/14-0606-DIS/Cond Ord

Postmark
 JUN 16 2014
 OKLAHOMA
 866-6-OK

PS Form 3800, January 2001 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> 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. 	<p>A. Signature <i>Phillip Eggenberg</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Phillip Eggenberg</i></p> <p>C. Date of Delivery <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 16/18 2014</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below</p>
<p>1. Article Addressed to:</p> <p>Phillip Eggenberg 220 Lake Murray Dr. Ardmore, OK 73401 sms/14-0606-DIS/Cond Ord</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <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>7001 0320 0004 4248 1459</p>	
<p>PS Form 3811, February 2004</p>	<p>Domestic Return Receipt 102595-02-M-1540</p>