

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

FILED
FEB 19 2015
INSURANCE COMMISSIONER
OKLAHOMA

STATE OF OKLAHOMA, ex rel. JOHN D. DOAK, Insurance Commissioner,)	
Petitioner,)	
vs.)	
)	Case No. 15-0171-DIS
TANYA ARBERTHA, a licensed bail bondsman in the State of Oklahoma,)	
Respondent.)	

**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 Tanya Arbertha (“Respondent”) is a licensed bail bondsman in the State of Oklahoma holding license number 40118051. Respondent’s license was suspended on December 10, 2014.

FINDINGS OF FACT

1. Respondent failed to file her December 2014 American Contractors Indemnity Company (“ACIC”) and December 2014 Lexington National Insurance Company (“LNIC”) reports with the Oklahoma Insurance Department (“Department”), which were due Thursday, January 15, 2015.
2. Respondent was appointed by ACIC on July 16, 2014 and has outstanding liability with ACIC of \$312,823.00.

3. Respondent was appointed with LNIC on October 3, 2013 and was cancelled by LNIC on April 8, 2014. Respondent has outstanding liability with LNIC of \$288,407.00.

4. On January 20, 2015, Department staff sent an email to Respondent regarding her failure to file the reports. On January 20, 2015, Respondent replied twice by email.

5. As of this date, the reports have not been filed with the Department.

CONCLUSIONS OF LAW

1. Respondent has violated 59 O.S. § 1310(A)(24) for failing to file a report as required by Section 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 Tanya Arbertha is **CENSURED** and **FINED** Seven Hundred Fifty Dollars (\$750.00). Respondent is further notified that she may request a hearing within thirty (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 **state the basis for requesting the hearing.**

If Respondent does not request a hearing within the thirty (30) days allotted, this Order

shall become a FINAL ORDER on the thirty-first (31st) day following the receipt of the Order,
and the fines ordered herein shall be due.

WITNESS My Hand and Official Seal this 19th day of February, 2015.



JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA

A handwritten signature in black ink, appearing to read "Dan R. Byrd", written over a horizontal line.

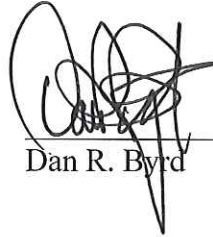
Dan R. Byrd
Assistant General Counsel
3625 NW 56th Street, Suite 100
Oklahoma City, Oklahoma, 73112
Tel. (405) 522-6330
Fax (405) 522-0125

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 19th day of February, 2015, to:

Tanya Arbertha
402 S. Benjamin St.
Stillwater, OK 74074-3711

**CERTIFIED MAIL NO:
7014 2870 0000 5493 4501**



Dan R. Byrd

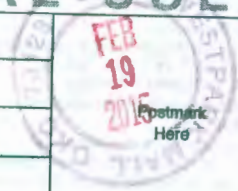
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CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

7014 2870 0000 5493 4501

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



Total Postage & Fee

Sent To: **Tanya Arbertha**
 402 S. Benjamin St.
 Stillwater, OK 74074-3711
 Street & Apt. No., or PO Box No. **15-0171-DIS/DRB(mt)**
 City, State, ZIP+4 **(Cond.Adm.Ord. ~2-19-15)**

PS Form 3800, July 2014

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:

Tanya Arbertha
 402 S. Benjamin St.
 Stillwater, OK 74074-3711
15-0171-DIS/DRB(mt)
(Cond.Adm.Ord. ~2-19-15)

2. Article Number
 (Transfer from service label)

7014 2870 0000 5493 4501

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Tanya Arbertha Addressee

B. Received by (Printed Name) **Tanya Arbertha** 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® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

FEB 26 2015

Legal Division

