

**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. 15-0189-DIS
DANA ENGLISH, 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 Dana English (“Respondent”) is a licensed bail bondsman in the State of Oklahoma holding license number 100182936.

FINDINGS OF FACT

1. Respondent failed to file her December 2014 Roche Surety & Casualty Company, Inc. (“RSCCI”) and December 2014 American Contractors Indemnity Company (“ACIC”) reports with the Oklahoma Insurance Department (“Department”), which were due Thursday, January 15, 2015.
2. Respondent was appointed by RSCCI on July 14, 2014 and has no outstanding liability with RSCCI, however a report is due.
3. Respondent was appointed with ACIC on June 6, 2014 and has outstanding liability with

ACIC of \$679,594.00.

4. On January 20, 2015, Department staff sent an email to Respondent regarding her failure to file the reports. On January 21, 2015, Department staff called Respondent. The outgoing voice mail message stated “person is unavailable.” Department staff called Steve Snyder’s office and spoke with Angie who advised that Respondent changed her phone number yesterday and Angie will have Respondent call the Department. On January 28, 2015, Department staff called and spoke with Respondent’s mother who advised that she would let Respondent know that her reports have not been received.

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. Respondent has violated 59 O.S. § 1314(D) for failing to pay reviewal fees.

4. 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 Dana English is **CENSURED** and **FINED** Five Hundred Dollars (\$500.00). 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", is written over a horizontal line.

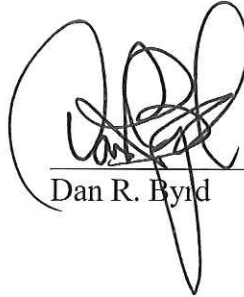
Dan R. Byrd
Assistant General Counsel
3625 NW 56th Street, Suite 100
Oklahoma City, Oklahoma, 73112
Tel. (405) 522-6330
Fax (405) 522-0125

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:

Dana English
10424 Kendall Ave.
Yukon, OK 73099-7815

**CERTIFIED MAIL NO:
7014 2870 0000 5493 4631**



Dan R. Byrd

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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For delivery information, visit our website at www.usps.com™.

OFFICIAL USE

7014 2870 0000 5493 4631

Postage	\$	
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage &		
Sent To Dana English 10424 Kendall Ave. Yukon, OK 73099-7815 15-0189-DIS/DRB(mt) (Cond.Adm.Ord. ~2-19-15)		
Street & Apt. No., or PO Box No. City, State, ZIP+4		

PS Form 3800, July 2014 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 mail piece, or on the front if space permits. 	<p>A. Signature x <i>Pat English</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Pat English</i> C. Date of Delivery <i>2-20-15</i></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> <div style="border: 1px solid black; padding: 5px; margin: 10px;"> Dana English 10424 Kendall Ave. Yukon, OK 73099-7815 15-0189-DIS/DRB(mt) (Cond.Adm.Ord. ~2-19-15) </div>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p>
<p>2. Article Number (Transfer from service label)</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>7014 2870 0000 5493 4631</p>	

PS Form 3811, July 2013

Domestic Return Receipt