

BEFORE THE INSURANCE COMMISSIONER OF THE
STATE OF OKLAHOMA

FILED
SEP 29 2015
INSURANCE COMMISSIONER
OKLAHOMA

STATE OF OKLAHOMA, ex rel. JOHN D.)
DOAK, Insurance Commissioner,)
Petitioner,)
vs.)
DEBRA A. BARRY, 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. 15-1128-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 Debra A. Barry ("Barry") is a licensed bail bondsman in the State of Oklahoma holding license number 200339.

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 April 11, 2015, an appearance bond was executed as follows:

Defendant: Gordon Matthew Taylor a/k/a Gordon Matthew(s) Boyd
Case Number(s): CF-2015-1505
City/County: Oklahoma County Court Clerk
Surety: Seneca Insurance Company, Inc.
Bondsman: Debra A. Barry
Power Number(s): S06 02364042
Bond Amount(s): \$2500

2. On June 4, 2015, the Defendant failed to appear, and the bond was orally declared forfeited. An Order and Judgment of Forfeiture was filed by the court on June 12, 2015. 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. Barry's copy of the Order and Judgment of Forfeiture was unclaimed.

4. SICI received a copy of the Order and Judgment of Forfeiture on June 15, 2015.

5. The ninety-first (91st) day after receipt of the Order and Judgment of Forfeiture by Respondents was Monday, September 14, 2015.

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

7. 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.

8. The bond was reported.

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 Debra A. Barry and Seneca Insurance Company, Inc. are **each CENSURED and FINED Five Hundred Dollars (\$500.00).**

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. and the **SUSPENSION** of Debra A. Barry’s license as a bail bondsman.

IT IS FURTHER ORDERED that if Respondents do not deposit the face amount of the bond forfeiture with the Oklahoma County Court Clerk (or have the bond forfeiture otherwise set aside or the bond exonerated) and each pay their FINES of Five Hundred Dollars within thirty (30) days of receipt of this Order that their licenses shall immediately be **SUSPENDED** until the bond forfeiture is deposited

with the Oklahoma County Court Clerk (or the bond forfeiture otherwise set aside or the bond exonerated) and each of their FINES of Five Hundred Dollars have been paid.


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 29th day of September, 2015.



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

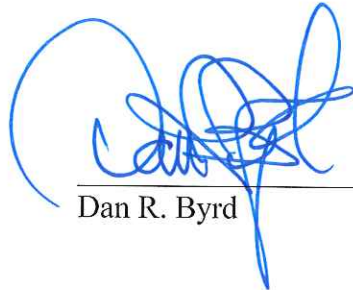
I hereby certify that a true and correct copy of the above and foregoing *Conditional Administrative Order and Notice of Right to Be Heard* was mailed certified, return receipt requested, on this 29th day of September, 2015, to:

Debra A. Barry
1141 N. Robinson Ave., Ste. 102
Oklahoma City, OK 73103-4919

**CERTIFIED MAIL NO:
7015 0640 0004 4933 6350**

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

**CERTIFIED MAIL NO:
7015 0640 0004 4933 6367**



Dan R. Byrd

7015 0640 0004 4933 6350

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<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postage
\$ _____

Total Postage and Fees
\$ _____



Sent To

Street and Apt. No., or PO Box

City, State, ZIP+4[®]

Debra A. Barry
1141 N. Robinson Ave., Ste. 102
Oklahoma City, OK 73103-4919
15-1128-DIS/DRB(mt)
(Cond.Adm.Ord.~9-29-15)

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Debra A. Barry
1141 N. Robinson Ave., Ste. 102
Oklahoma City, OK 73103-4919
15-1128-DIS/DRB(mt)
(Cond.Adm.Ord.~9-29-15)



9590 9403 0272 5155 1365 07

2. Article Number (Transfer from service label)

7015 0640 0004 4933 6350

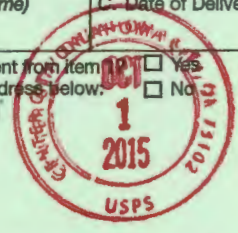
COMPLETE THIS SECTION ON DELIVERY

A. Signature
X. Priscilla Cadena ☐ Agent ☐ Addressee

B. Received by (Printed Name) _____ C. Date of Delivery _____

D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below: _____

OKLAHOMA INSURANCE DEPARTMENT
OCT 06 2015
Legal Division



3. Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express [®]
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail TM
<input checked="" type="checkbox"/> Certified Mail [®]	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation TM
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	

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☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage

\$

Total Postage and Fees

\$

Sent To

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

Seneca Insurance Company, Inc.
 160 Water Street, 16TH Floor
 New York, NY 10038
15-1128-DIS/DRB(mt)
(Cond.Adm.Ord.~9-29-15)

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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.
 160 Water Street, 16TH Floor
 New York, NY 10038
15-1128-DIS/DRB(mt)
(Cond.Adm.Ord.~9-29-15)



9590 9403 0272 5155 1365 14

2. Article Number (Transfer from service label)

7015 0640 0004 4933 6367

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

RECEIVED
 INSURANCE DEPARTMENT

OCT 27 2015

Local Division

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
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☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)

- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt