

**OKLAHOMA SECURITY VERIFICATION FORM  
OWNERS FORM**

COMPANY NUMBER                      COMPANY NAME AND ADDRESS

POLICY NUMBER    EFFECTIVE DATE                      EXPIRATION DATE

YEAR                      MAKE/MODEL    VEHICLE IDENTIFICATION NUMBER

AGENCY/COMPANY ISSUING FORM (INCLUDE TELEPHONE NUMBER)

NAME OF INSURED

COVERAGES:    A    C    D    G    L    N    R    R1    U    S    T    Z

A LIABILITY INSURANCE POLICY HAS BEEN ISSUED PURSUANT TO THE COMPULSORY INSURANCE LAW OF OKLAHOMA. IF THIS IS AN OWNERS FORM, KEEP IN THE MOTOR VEHICLE AT ALL TIMES. IF AN OPERATORS FORM, CARRY IT WHENEVER OPERATING ANY VEHICLE.

SEE IMPORTANT INFORMATION ON REVERSE SIDE

HOW TO IDENTIFY YOUR COVERAGE

A	LIABILITY (BODILY INJURY/ PROPERTY DAMAGE)	R	CAR RENTAL
C	MEDICAL PAYMENTS	R1	CAR RENTAL AND TRAVEL EXPENSE
D	COMPREHENSIVE	U	UNINSURED MOTOR VEHICLE
G	COLLISION	S	DEATH, DISMEMBERMENT
L	LOSS TO YOUR RECREATIONAL VEH.	T	DISABILITY
N	EMERGENCY ROAD SERVICE	Z	LOSS OF EARNINGS

**EXAMINE POLICY EXCLUSIONS CAREFULLY. THIS FORM DOES  
NOT CONSTITUTE ANY PART OF YOUR INSURANCE POLICY.**

OKLAHOMA STATE LAW REQUIRES THAT THIS COPY OF THE OWNERS SECURITY VERIFICATION FORM BE CARRIED IN THE MOTOR VEHICLE AT ALL TIMES, AND BE PRODUCED BY ANY DRIVER OF THE VEHICLE UPON REQUEST FOR INSPECTION BY ANY PEACE OFFICER OR REPRESENTATIVE OF THE DEPARTMENT OF PUBLIC SAFETY. IN THE CASE OF A COLLISION, THIS FORM SHALL BE SHOWN UPON REQUEST OF ANY PERSON AFFECTED BY THE COLLISION.

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SEE IMPORTANT INFORMATION ON REVERSE SIDE

HOW TO IDENTIFY YOUR COVERAGE

- |   |   |    |                               |
|---|---|----|-------------------------------|
| A | LIABILITY (BODILY INJURY/<br>PROPERTY DAMAGE) | R  | CAR RENTAL                    |
| C | MEDICAL PAYMENTS                              | R1 | CAR RENTAL AND TRAVEL EXPENSE |
| D | COMPREHENSIVE                                 | U  | UNINSURED MOTOR VEHICLE       |
| G | COLLISION                                     | S  | DEATH, DISMEMBERMENT          |
| L | LOSS TO YOUR RECREATIONAL VEH.                | T  | DISABILITY                    |
| N | EMERGENCY ROAD SERVICE                        | Z  | LOSS OF EARNINGS              |

**EXAMINE POLICY EXCLUSIONS CAREFULLY. THIS FORM DOES NOT CONSTITUTE ANY PART OF YOUR INSURANCE POLICY.**

OKLAHOMA STATE LAW REQUIRES THAT A CURRENT COPY OF THE OWNERS SECURITY VERIFICATION FORM MUST BE SURRENDERED TO THE MOTOR LICENSE AGENT OR OTHER REGISTERING AGENCY UPON APPLICATION OR RENEWAL FOR A MOTOR VEHICLE LICENSE PLATE.