



**OKLAHOMA UNINSURED VEHICLE
ENFORCEMENT DIVERSION PROGRAM**

Oklahoma UVED Program
P.O. Box 471887
Tulsa, OK 74147

**NOTICE OF VIOLATION -
OPEN IMMEDIATELY**

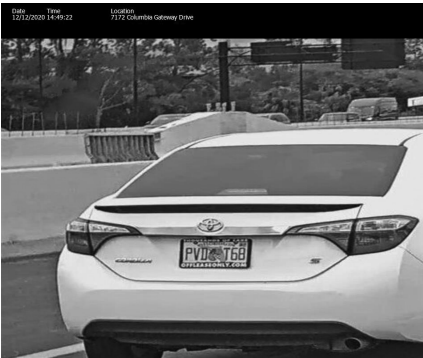
FIRST LAST
123 ANY STREET
CITY NAME, STATE XXXXX

HABLA ESPAÑOL? Llama 1-405-806-8833

NOTICE OF VIOLATION
OFFICIAL NOTICE OF MOTOR VEHICLE
INSURANCE LIABILITY. DO NOT DISCARD.

AUTOMATED ENFORCEMENT

DATE OF OCCURRENCE 12/15/2020	NOTICE NUMBER OK123456789
VEHICLE TAG ABC 123	PIN NUMBER 12345
LOCATION Route 37 EB, Moore, OK	
AMOUNT DUE \$174.00	DATE DUE MM/DD/YYYY



AUTOMATED RECORDED IMAGE 12/15/2020

I am a duly sworn law enforcement officer in the State of Oklahoma. Based on inspection of the recorded image and associated evidence, the motor vehicle was operated in violation of Title 47, Section 7-606 of the Oklahoma Statutes, per the discretion of the District Attorney, as evidenced by the above images.

Sworn to or Affirmed

Investigator

**THE VEHICLE PICTURED HERE
WAS SPOTTED ON THE ROAD
WITHOUT INSURANCE.**

State records indicate that the vehicle was not in compliance with the provisions of the Oklahoma Compulsory Vehicle Insurance Law, and was operated in violation of Title 47, Section 7-606.1, which outlines the State's Uninsured Vehicle Enforcement Program.

This matter has been referred to the **Uninsured Vehicle Enforcement Diversion Program**, which provides a fair and cost-effective solution to resolve the issue without associated penalties, such as **a permanent mark on your driving record, suspension of license, or criminal charges if acted upon within 30 days.**

**YOU MUST COMPLETE ONE OF THESE
STEPS BY MM/DD/YYYY TO AVOID
FURTHER ACTION:**

(Full details for each can be found on the back of this notice.)

- 1. Pay the fee amount indicated below and agree to enroll in the Diversion Program**
- 2. Verify you had insurance coverage at the time of the occurrence**
- 3. Contest this notice**

To ensure there are no delays with your payment or rejection of your participation in the program, if paying by mail, be sure to include the form below with your payment. Please do not send cash.

QUESTIONS ABOUT THIS NOTICE?

Call UVED Customer Support at:
1-405-806-8833 (8AM-5PM CST)

Failure to attach remittance slip may result in delays or rejection of your participation. See reverse side for details.

Name & Address of Registered Owner
Jane Doe
123 Any Street
Testville, OK 12345

OKLAHOMA UVED PROGRAM
P.O. BOX 471887
TULSA, OK 74147

AMOUNT DUE	\$174.00
DATE DUE	MM/DD/YYYY
NOTICE NUMBER	VEHICLE TAG
OK123456789	ABC 123

TO PAY THIS VIOLATION: (DO NOT SEND CASH)

Pay Online:

Visit www.UVEDOK.org. Enter the Notice and PIN number provided above.

Pay by Mail:

Make check or money order payable to:
Oklahoma UVED Program

6000080 OK123456789 000000000 mmdyyy



**OKLAHOMA UNINSURED VEHICLE
ENFORCEMENT DIVERSION PROGRAM**

Oklahoma UVED Program
P.O. Box 471887
Tulsa, OK 74147

This notice of violation was sent to you because your vehicle was identified as operating while uninsured on the date and time indicated in the photo on the reverse side.

FAILURE TO RESPOND TO THE NOTICE MAY RESULT IN THE SUSPENSION OF YOUR DRIVING PRIVILEGES AND THE ASSESSMENT OF ADDITIONAL FEES.

A ticket for this violation by a law enforcement officer at roadside would carry a larger fine with the possibility of license suspension and a negative impact on your driving record. As part of the Uninsured Vehicle Enforcement Diversion (UVED) Program, you are being assessed a reduced fee, and this matter does not impact your permanent driving record. However, you must:

- Pay the assessed fee by the date specified on the front of this notice.
- Obtain and maintain vehicle coverage for a minimum of two (2) years.

Already have or need help obtaining insurance?

If your vehicle was insured on the date the photograph on this notice was taken, you must contact your insurance provider to request verification of your insurance status for the date specified. Oklahoma-licensed insurance agents and carriers should electronically verify your insurance information using the Oklahoma Insurance Verification System at www.OKIVS.com and the Notice Number provided.

For more information, to enroll in the UVED Program, to obtain insurance, or to contest this notice because of a mitigating circumstance, please go to:



www.UVEDOK.org



1-405-806-8833
(8AM-5PM CST)

Thank you,

Amanda Arnall Couch
UVED Program Director, DAC

WAIVER AND AGREEMENT

The State of Oklahoma hereby agrees to defer, for the 24 months following [date of violation], the filing of criminal charges regarding Enrollee's [date of violation] failure to comply with the State's compulsory insurance law (47 O.S. § 7-601), upon Enrollee's acknowledgment of the following:

- (1) Enrollee has acquired liability insurance sufficient to comply with the State's compulsory insurance law (47 O.S. § 7-601);
- (2) Enrollee will maintain compliant liability insurance for the duration of the Program;
- (3) Enrollee understands s/he has the right to a speedy filing and trial of criminal charges, but waives those rights in order to receive the benefit of the UVED Program, and agrees the 24 months following [date of violation] will not accumulate against the statute of limitations for this offense, as per State law (22 O.S. § 4-305.2);
- (4) Enrollee has tendered the \$174.00 fee to enroll in the UVED Program, as provided by State law (47 O.S. § 7-606.2); and
- (5) The State of Oklahoma will not file criminal charges regarding this particular offense for the 24 months following [date of violation], so long as Enrollee remains compliant with the requirements of the UVED Program indicated above.

SIGNATURE

TODAY'S DATE