



**OKLAHOMA UNINSURED VEHICLE ENFORCEMENT DIVERSION PROGRAM**

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

HABLA ESPAÑOL? Llama 1-405-806-8833

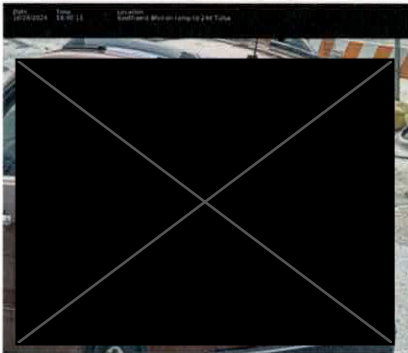
**NOTICE OF VIOLATION**

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

**NOTICE OF VIOLATION - OPEN IMMEDIATELY**

**AUTOMATED ENFORCEMENT**

DATE OF OCCURRENCE [REDACTED]	NOTICE NUMBER [REDACTED]
VEHICLE TAG [REDACTED]	PIN NUMBER [REDACTED]
LOCATION SOUTHWEST BLVD ON RAMP TO 244 TULSA	
AMOUNT DUE \$ 190.00	DATE DUE [REDACTED]



AUTOMATED RECORDED IMAGE 10/28/2024

**THE VEHICLE PICTURED HERE WAS IDENTIFIED 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 not acted upon within 30 days.**

**YOU MUST COMPLETE ONE OF THESE OPTIONS BY 11/27/2024 TO AVOID FURTHER ACTION:**

1. Enroll in the UVED Program by acquiring verifiable insurance coverage and paying the fee indicated; or
2. Direct your insurance carrier to verify your coverage via the Oklahoma Insurance Verification System; or
3. Visit [www.UVEDOK.org](http://www.UVEDOK.org) (Resolve Notice) to contest this Notice.

Please be sure to include the form below if paying by mail. **DO NOT SEND CASH.**

**QUESTIONS?**

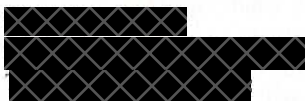
Call UVED Customer Support at (405)806-8833 (Monday-Friday, 8AM-5PM) or visit [www.UVEDOK.org](http://www.UVEDOK.org) (Resolve Notice) anytime to check Notice status.

*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

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

Name & Address of Registered Owner



AMOUNT DUE	\$ 190.00	
DATE DUE	11/27/2024	
NOTICE NUMBER [REDACTED]	VEHICLE TAG [REDACTED]	PIN NUMBER [REDACTED]

**TO PAY BY MAIL:** DO NOT SEND CASH. Make check or money order payable to "Oklahoma UVED Program".

**TO PAY ONLINE OR CHECK STATUS:**

Visit [www.UVEDOK.org](http://www.UVEDOK.org) (Resolve Notice), using the Notice number and PIN provided above.

OKLAHOMA UVED PROGRAM

P.O. BOX 471887  
TULSA, OK 74147





**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:

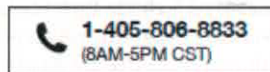
- Pay the assessed fee by the date specified on the front of this notice.
- Obtain and maintain vehicle coverage for a minimum of two (2) years.

**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](http://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:

**To Pay By Phone**



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 10/28/2024, the filing of criminal charges regarding Enrollee's 10/28/2024 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 OS. § 7-601);
- (2) Enrollee will maintain compliant liability insurance for the duration of the Program;
- (3) Enrollee understands she/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 10/28/2024 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 \$190.00 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 10/28/2024, so long as Enrollee remains compliant with the requirements of the UVED Program indicated above.

SIGNATURE

TODAY'S DATE