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AGENCY/COMPANY ISSUING FORM (INCLUDE ADDRESS AND TELEPHONE NUMBER)

ACA Club insurance Agency - EA OK

2014

TOYO CAMRY MAKEMODEL

4T1BF1FK1EU364770

VEHICLE IDENTIFICATION NUMBER

07/03/2020

01/00/2021

Chartetoooga

NAME OF INSURED

Janice Mccauley

**EXCLUDED DRIVERS** 

COVERAGES:

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AN OWNER'S LIABILITY INSURANCE POLICY HAS BEEN ISSUED PURSUANT TO THE COMPULSORY INSURANCE LAW OF OKLAHOMA. KEEP A COPY OF THIS OWNER'S SECURITY VERIFICATION FORM IN THE MOTOR VEHICLE AT ALL TIMES. SUBMIT A COPY OF THIS OWNER'S SECURITY VERIFICATION FORM WITH YOUR APPLICATION FOR REGISTRATION.

SEE IMPORTANT INFORMATION ON REVERSE SIDE

### OKLAHOMA OWNERS SECURITY VERIFICATION FORM

COMPANY NAIC NUMBER CSAA General Insurance (AAA IG Auto) COMMERCIAL X PERSONAL

MAKE/MODEL
TOYO CAMRY 4T1BF1FK1EU364770 VEHICLE IDENTIFICATION NUMBER

07/05/2020

EXPIRATION DATE 01/05/2021

2014 YEAR POLICY NUMBER OKSS202880855

37770

AGENCY/COMPANY ISSUING FORM (INCLUDE ADDRESS AND TELEPHONE NUMBER) ACA Club Insurance Agency - EA OK

Janice Mccauley

NAME OF INSURED

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SEE IMPORTANT INFORMATION ON REVERSE SIDE

### HOW TO IDENTIFY YOUR COVERAGE

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CAR RENTAL

CAR RENTAL AND TRAVEL EXPENSE

> LIABILITY (BODILY INJURY/

PROPERTY DAMAGE)
MEDICAL PAYMENTS
COMPREHENSIVE

zrada COLLISION LOSS TO YOUR RECREATIONAL VEH.

**EMERGENCY ROAD SERVICE** 

UNINSURED MOTOR VEHICLE DEATH, DISMEMBERMENT DISABILITY

LOSS OF EARNINGS

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

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 AN ACCIDENT, THIS FORM SHALL BE SHOWN UPON REQUEST OF ANY PERSON AFFECTED BY THE ACCIDENT. OKLAHOMA STATE LAW REQUIRES THAT A COPY OF THIS OWNERS SECURITY

OKLAHOMA STATE LAW ALSO REQUIRES THAT A CURRENT COPY OF THIS 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.

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### HOW TO IDENTIFY YOUR COVERAGE

> LIABILITY (BODILY INJURY)

PROPERTY DAMAGE)
MEDICAL PAYMENTS

zraun COMPREHENSIVE

LOSS TO YOUR RECREATIONAL VEH.

**EMERGENCY ROAD SERVICE** 

CAR RENTAL

CAR RENTAL AND TRAVEL EXPENSE
UNINSURED MOTOR VEHICLE
DEATH, DISMEMBERMENT

DISABILITY

LOSS OF EARNINGS

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## OKLAHOMA OPERATORS SECURITY VERIFICATION FORM

COMPANY NAIC NUMBER	COMPANY NAME AND ADDRESS COMMERCIAL CSAA General Insurance (AAA IG Auto)	X PERSONAL
POLICY NUMBER OKSS202880855	EFFECTIVE DATE E 07/05/2020 (	EXPIRATION DATE 01/05/2021
YEAR MAKE/MODEL	VEHICLE IDENTIFICATION NUMBER	JMBER

70

1996

**BUIC PARK AVENU** 

1G4CW52K3TH618616

AGENCY/COMPANY ISSUING FORM (INCLUDE ADDRESS AND TELEPHONE NUMBER)

ACA Club Insurance Agency - EA OK

NAME OF INSURED

Janice Mccauley

COVERAGES: ② 。

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A LIABILITY INSURANCE POLICY HAS BEEN ISSUED PURSUANT TO THE COMPULSORY INSURANCE LAW OF OKLAHOMA. CARRY THIS OPERATORS SECURITY VERIFICATION FORM WHENEVER OPERATING ANY MOTOR VEHICLE.

SEE IMPORTANT INFORMATION ON REVERSE SIDE

## **OKLAHOMA OPERATORS SECURITY VERIFICATION FORM**

CSAA General Insurance (AAA IG Auto) COMPANY NAME AND ADDRESS COMMERCIAL X PERSONAL

37770 COMPANY NAIC NUMBER

MAKE/MODEL

YEAR

OKSS202880855

POLICY NUMBER

1996

**BUIC PARK AVENU** 

VEHICLE IDENTIFICATION NUMBER 1G4CW52K3TH618616

07/05/2020

EXPIRATION DATE 01/05/2021

AGENCY/COMPANY ISSUING FORM (INCLUDE ADDRESS AND TELEPHONE NUMBER) ACA Club Insurance Agency - EA OK

NAME OF INSURED

Janice Mccauley

COVERAGES: © ° GLNR 꼰 \_ s 4

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SEE IMPORTANT INFORMATION ON REVERSE SIDE

### HOW TO IDENTIFY YOUR COVERAGE

- LIABILITY (BODILY INJURY/ PROPERTY DAMAGE)
- MEDICAL PAYMENTS
- COMPREHENSIVE
- COLLISION
- EMERGENCY ROAD SERVICE
  - LOSS OF EARNINGS
  - ∨⊣∾⊂⊼⊐ DISABILITY

DEATH, DISMEMBERMENT UNINSURED MOTOR VEHICLE

CAR RENTAL AND TRAVEL EXPENSE

CAR RENTAL

# **EXAMINE POLICY EXCLUSIONS CAREFULLY. THIS FORM DOES**

NOT CONSTITUTE ANY PART OF YOUR INSURANCE POLICY.

OKLAHOMA STATE LAW REQUIRES THAT THIS OPERATORS SECURITY

OPERATOR OF THIS MOTOR VEHICLE. THIS FORM SHALL 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 AN ACCIDENT, THIS FORM SHALL BE SHOWN UPON REQUEST OF ANY PERSON AFFECTED BY THE ACCIDENT. VERIFICATION FORM MAY BE CARRIED IN LIEU OF AN OWNERS FORM BY AN

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#### **HOW TO IDENTIFY YOUR COVERAGE**

- LIABILITY (BODILY INJURY) PROPERTY DAMAGE)
  MEDICAL PAYMENTS
- COMPREHENSIVE
- 0 D C
- COLLISION
- OSS TO YOUR RECREATIONAL VEH
- **EMERGENCY ROAD SERVICE**
- ∨⊣ഗ⊂ಸ್ತಸ LOSS OF EARNINGS

DISABILITY

CAR RENTAL AND TRAVEL EXPENSE UNINSURED MOTOR VEHICLE DEATH, DISMEMBERMENT

CAR RENTAL

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

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