

OKLAHOMA OWNERS SECURITY VERIFICATION FORM

COMPANY NAME AND ADDRESS ☒ COMMERCIAL ☐ PERSONAL
Travelers Property Casualty Ins. Co
COMPANY NAIC NUMBER 36161 Hartford CT
POLICY NUMBER 8104S1098852614G EFFECTIVE DATE 08/01/2026 EXPIRATION DATE 08/01/2027
YEAR MAKE/MODEL VEHICLE IDENTIFICATION NUMBER
Fleet Card

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

USI Insurance Services, LLC
14241 Dallas Pkwy STE 700
Dallas TX 75254 (214) 443-3100
NAME OF INSURED
Oral Roberts University

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

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

SEE IMPORTANT INFORMATION ON REVERSE SIDE

HOW TO IDENTIFY YOUR COVERAGE

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

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

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

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.