



6501 Broadway Extension, Suite 250
Oklahoma City, OK 73116
(405) 524-3468 or (800) 955-EGOV
FAX: (405) 524-3469

Registered Services Agreement

You must be a registered user to access certain e-Government services through Oklahoma Interactive, LLC. Registered Service is offered on an annual basis.

To register, read all the information carefully, complete this agreement and return it to us with a check or money order payable to Oklahoma Interactive, LLC in the amount of \$75 for the initial year's service fee. Thereafter, the annual registration renewal is \$75 and will be billed to your account automatically.

Certain portal services have statutory and/or Oklahoma Interactive, LLC transaction fees associated with them. Information about these services is provided online at the associated Internet pages.

There may be restrictions on access to certain records and some records are restricted in use. You may be subject to penalties under law if you violate any of these restrictions. If you have any questions regarding information contained within this agreement, please contact Oklahoma Interactive, LLC at 1-800-955-EGOV (1-800-955-3468).

Signing up is as easy as 1, 2, 3 . . .

- 1) **You will need a computer with an Internet connection.**
- 2) **Complete this Subscription Registration Agreement.** Don't forget to list the name(s) to be assigned to your registration on page two. Then, choose a billing method and sign below.
- 3) **Sign and return this Agreement with your check or money order made payable to Oklahoma Interactive, LLC to the address above.** Upon receipt of the signed and completed agreement, Oklahoma Interactive, LLC will provide your login information. Once you receive this information, you may begin using our subscription services immediately.

CUSTOMER SIGNATURE – sign here

Signature	Date
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Name (printed)	Title
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By my signature I agree that:

I have read and agree to the terms and conditions of Oklahoma Interactive, LLC's Registered Services Agreement as presented.

Mailing Address Organization Name: _____
Attention: _____ Title: _____
Address: _____
City/State/Zip: _____
Telephone: _____ Ext. _____ FAX: _____

Billing Address Organization Name: _____
Attention: _____ Title: _____
Address: _____
City/State/Zip: _____
Telephone: _____ Ext. _____ FAX: _____

Billing Options **Please Select credit card, ACH debit, or monthly invoice:**

VISA/MasterCard

(Monthly usage fees are charged to credit card)

Card # _____

ACH debit

(Monthly usage fees are deducted from bank account)

Bank Name _____

Exp. Date: _____

Routing# _____

Monthly Manual Invoice

(Monthly charge is \$15.00 or actual usage fees; whichever is larger. Monthly statement sent via U.S. mail.)

Please select the service desired:

Motor Vehicle Records via batch process – require signature of DPPA form

Name(s) to be assigned to subscription: (max. 10 users per subscription – Subscriber Services Only)

	Name	Email Address	Office Use Only – UN
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____