HOW TO READ YOUR NOTICE OF DELINQUENT TOLL EVASION



Issue Date

The date the notice was issued. Payment is due within 30 days of this date to avoid additional penalties and collection activities.

Reference & Violation Number

Used to identify the violation and needed when paying online, by phone, or by mail.

Violation Details Table

- a. Date and Time When the violation occurred.
- b. Entry/Exit Location Toll points used.
- c. Toll Amount The cost of the trip on the SB Express Lanes.
- d. Amount Due and Deadline Shows by what date to pay by to avoid the additional \$25 penalty (column e).
- Amount Due and Deadline includes additional \$25 penalty for not paying by the initial due date (column d).

Amount Due

Shows how much is due. May reflect on an additional page.

PayNearMe - Mobile

Allows customers to scan and pay using their mobile phone (credit, PayPal, Apple Pay, etc.) Convenience fees will be applied.

PayNearMe - Cash

Use the PayNearMe feature to pay this invoice in-person using cash at one of the businesses listed, and resolve violations with cash. Convenience fees will be applied.

Ways to Pay

Provides information on multiple ways to pay this Notice without incurring a convenience fee.

Customer Support Info

Ways to contact customer support and to get more information on your Notice of Toll Evasion

Affidavit of Non-Liability (Section A)

DRIVER 1234 AUTO LANE IRVINE CA 92618-1234

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For use if the car was sold, leased, rented, or stolen at the time of the violation. Requires supporting documentation.

Administrative Investigation Request (Section B)

To contest the violation if the recipient believes it was issued in error. No payment is required to request the investigation.





Affidavit of Non-Liability and/or Request for Administrative Investigation:
SB Express Lanes c/o The Toll Roads Violations Department P.O. Box 57114, Irvine, CA 92619-7114
SBExpressLanes.com/violation or (909) 333-4791

Section A-Affidavit of Non-Liability: The Department of Motor Vehicles (DMV) provided the name and address on the reverse side of this toll evasion notice as the registered owner of the vehicle at the time the buffls) was incurred. Under Callinian Vehicle Code (CVC) § 40250, the registered owner of the vehicle is responsible for tollolly. If the vehicle was sold, transferred, stolen, leased or rented at the time of the tolls) gives exceptled the declaration below and return it to the address above. We will review the information and documentation provided and determine whether it provides sufficient grounds for dismissal or transfer of the violation. The result of this review will be communicated to you.

The vehicle bearing the license plate number on the reverse side of this hotice was:		
(Check only one) ☐ Sold/Transferred ☐ Stolen ☐ Leased/Rented		
Name and address of responsible party (e.g., Rentee, Lessee, Transferee, Purchase	r, New Registered Owner):	
Name	_ Driver's License Numbe	r
Street Address	Telephone Number	
City	State	Zip Code
Date of Sale/transfer, Rental or Theft		
Please include one of the following documents: (1) copy of the bill of sale or relea naming the person above and the terms of the agreement, or (3) police report citir		e DMV, (2) copy of the lease or rental agreement

I declare under penalty of perjury that the foregoing information is true and correct:

Name Signature Date Contact Phone Number Email Address

Section B-Request for an Administrative Investigation: If you do not believe you are responsible for the toll(s) indicated on the reverse side of this notice, or you wish to challenge any aspect of the notice, you may contest. Please provide a written explanation of the reason(s) for contesting. You can submit this completed form or provide the information online at SBEX pressal ares comividation, and SBCTA will investigate the circumstances described in your explanation (Administrative Investigation). You are not required to deposit the outstanding tolls for or penalties for SBCTA to conduct an Administrative Investigation.

I do not believe I owe, or should ow	e, the amount indicated on the reverse side of this notice. I am requesting	g an Administrative Investigation of the items that constitute
my defense against liability for the t	oll(s) and/or penalty. I have included a written explanation of the reason(s	s) I am contesting.
Name	Signature	Date

Statement of reasons for Administrative Investigation request: