

REPORT OF TRAFFIC ACCIDENT INVOLVING AN AUTONOMOUS VEHICLE

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AVT NUMBER			0 - Property 1 - 1 - 1 - 1 - 1	200	
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Instructions: Please print within the spaces and boxes on this form. If you need to provide additional information on a separate piece of paper(s) or you include a copy of any law enforcement agency report, please check the box to indicate "Additional Information Attached."

- Write unk (for unknown) or none in any space or box when you do not have the information on the other party involved.
- Give insurance information that is complete and which correctly and *fully* identifies the **company** that issued the insurance policy or surety bond, or whether there is a certificate of self-insurance.
- Place the National Association of Insurance Commissioners (NAIC) number for your insurance or Surety Company in the boxes provided. The NAIC number should be located on the proof of insurance provided by you company or you can contact your insurer for that information.
- Identify any person involved in the accident (driver, passenger, bicyclist, pedestrian, etc) that you saw was injured or complained of bodily injury or know to be deceased.
- Record in the PROPERTY DAMAGE line any damage to telephone poles, fences, street signs, guard post, trees, livestock, dogs, buildings, parked vehicles, etc., including a description of the damage.
- Once you have completed this report, please mail to: Department of Motor Vehicles, Occupational Licensing Branch, P.O. Box 932342, MS: L224, Sacramento, CA 94232-3420

Box 932342, MS: L2	24, Sacramento, CA 94232-3	420				
SECTION 1 MANUE	CTURER'S INFORMATION		See The Section of th			
MANUFACTURER'S NAME					AVT NUMBER	
GOOGLE AUTO LLC						
BUSINESS NAME				ITELEPHON	IE NUMBER	
GOOGLE AUTO LLC			· ·	1.V		
STREET ADDRESS	CITY	A.	0.2	STATE	ZIP CODE	
SECTION 2 = ACCIDE	NT INFORMATION					
DATE OF ACCIDENT	TIME OF ACCIDENT VEHIC	LE YEAR	MAKE	MODEL		
04/07/2016	☑ AM ☐ PM 2012		LEXUS	RX4501	H	
LICENSE PLATE NUMBER	VEHICLE IDENTIFICATION NUMBER			STATE VEH	IICLE IS REGISTERED IN	
ADDRESS/LOCATION OF ACCIDENT	CHY		COUNTY	STATE	ZIP GODE	
BRYANT ST. AT OREGO	ON EXPY PAI	O ALTO	SANTA CLARA	CA	94301	
		☐ Pedestrian	75.6.		OF VEHICLES INVOLVED	
Vehicle ☐ Moving was: ☐ Stoppe	ed in Traffic the Accident		Other	1		
DRIVER'S FULL NAME (FIRST, MIDDLE	LAST)	DRIVER LICENSE NUMBE	A TOTAL	STATE	DATE OF BIRTH	
			ι		I	
INSURANCE COMPANY NAME OF SU	RETY COMPANY AT TIME OF ACCIDENT	POLICY NUMBER				
COMPANY NAIC NUMBER		POLICY PERIOD	-		The state of the s	
		FROI	TO _			
SECTION 3 - OTHER	PARTY'S INFORMATION				1	
VEHICLE YEAR	MODEL	<u></u>	A STATE OF THE PARTY OF THE PAR	. <u> </u>		
1999	LEXUS LS400					
LICENSE PLATE NUMBER	VEHICLE IDENTIFICATION NUMBER	A Addition I will be a second of the second		STATE VE	HICLE IS REGISTERED IN	
Vehicle Moving	g Involved in	☐ Pedestrian		1	OF VEHICLES INVOLVED	
was: Stoppe	ed in Traffic the Accident		Other	1		
DRIVER'S FULL NAME (FIRST, MIDDLE	E, LAST)	DRIVER LICENSE NUMBE	A	STATE	DATE OF BIRTH	
INSURANCE COMPANY NAME OR SU	RETY COMPANY AT TIME OF ACCIDENT	POLICY NUMBER			- Inc.	
The state of the s		POLICY PERIOD	The state of the s			
COMPANY NAKO NUMBER		LOTICA SERIOR	TO			
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Additional informat	lon attached.					

APR 2 5 2016



SECTION 4 - INJURY/DEATH,	PROPERTY DAMAGE				
NAME (FIRST, MIDDLE, LAST)					
AODRESS	ÇFTY	Annicontental		STATE	ZIP CODE
CHECK ALL THAT APPLY 🗆 II	njured 🗆 Deceased	☐ Driver	☐ Passenger	☐ Bioyclist	☐ Property
NAME (FIRST, MIDDLE, LAST)	4			урур — того положения	
ADDRESS	CITY	alala kanadha k		STATE	ZIP CODE
CHECK ALL THAT APPLY 🗆 II	njured Deceased	☐ Driver	☐ Passenger	☐ Bloyclist	☐ Property
PROPERTY DAMAGE	····				
PROPERTY OWNER'S NAME				TELEPHON	NE NUMBER
STREET ADDRESS	CITY			STATE	ZIP CODE
WITNESS NAME				TELEPHOI	NE NUMBER
STREET ADDRESS	CITY			STATE	ZIP CODE
NITNESS NAME			and the second s	TELEPHOI	NE NUMBER
STREET ADDRESS	CITY		(Programme) Marie and Mar	STATE	ZIP CODE
☐ Additional information attacl	ned.	and the second and th			**************************************
SECTION 5 - ACCIDENT DETA	Same and the second of the sec				
A GOOGLE LEXUS MODEL AUTO IN PALO ALTO IN AUTONOMOU OREGON EXPY. A VEHICLE ATT GOOGLE AV. THE OTHER VEHIC THERE WERE NO INJURIES REPO AND THE OTHER VEHICLE'S LEI	S MODE AND WAS STOP EMPTING TO PASS ON T CLE'S LEFT SIDE-VIEW M ORTED AT THE SCENE B	PED BEHIND HE RIGHT SH IRROR GRAZ Y EITHER PA	TRAFFIC AT THE OULDER VERY SI ED THE PASSENG RTY, THE GOOGL	RED LIGHT IN LIGHTLY CONT ER SIDE OF OU	TERSECTION OF TACTED THE JR VEHICLE.
☐ Additional information attacl	ned.				
SECTION 6 — CERTIFICATION					
l certify (or declare) under pen correct.	alty of perjury under th	e laws of th	State of Califor	nia that the fo	regoing is true ar
I further certify that I am the aut		f the prograi	n for the above n	amed employe	r.
PROGRAM DIRECTOR/AUTHORIZEO REPRESENTATI	IVE PRINTED NAME AND TITLE			TELEPHO	ONE NUMBER
SIGNATORE	The state of the s	- Section of the Sect	AND THE PROPERTY OF THE PROPER	DATE SIG	9/14/2016
		er h Ann Tadanna ar en en effer de mahamapana analet de la	The state of the s	THE CONTRACT OF THE CONTRACT O	OL 318 (NEW 10/2013) WY