Reporting Entity

OMB No. 2127-0754. Expires: 3/31/2026.

REPORT TYPE REPORT MONTH & YEAR UNITED STATES DEPARTMENT OF TRANSPORTATION 1-Day NATIONAL HIGHWAY TRAFFIC SAFETY ADMINISTRATION Standing General Order 2021-01 NHTSA-PROVIDED REPORT ID Appendix C - Incident Report Subject Vehicle Information MODEL YEAR UNK MILEAGE ☐ UNK MAKE MODEL VIN and/or S/N (N/A=Not applicable) UNK DRIVER / OPERATOR TYPE ADS EQUIPPED? VIN --- Select ----- Select ---S/N UNK OPERATING ENTITY AUTOMATION SYSTEM ENGAGED AT THE TIME OF THE INCIDENT -- Select ---UNK NO FEDERAL STATUTORY OR REGULATORY EXEMPTION? STATE OR LOCAL PERMIT? OTHER ENTITIES THAT MAY BE AWARE OF THIS INCIDENT? UNK NA Select one or more -Select ---UNK CBI UNK CBI UNK CBI ADAS / ADS SYSTEM VERSION ADAS / ADS SYSTEM HARDWARE VERSION ADAS / ADS SOFTWARE VERSION Incident Information UNK INCIDENT DATE ☐ UNK INCIDENT TIME (24-hour format) SOURCE Complaint / Claim Law Enforcement Other: 00:00 ☐ Testing Telematics Field Report ☐ Media RECEIVED DATE Incident Scene UNK LOCATION ADDR ☐ UNK UNK STATE UNK LATITUDE (decimal) LONGITUDE (decimal) CITY ZIP CODE Select ---ROADWAY TYPE WEATHER --- Select ---Clear ☐ Snow Unknown Cloudy Other: Fog / Smoke SPEED LIMIT (mph) ROADWAY DESCRIPTION Rain ☐ Severe Wind --- Select ---LIGHTING --- Select ---**Crash Description** HIGHEST IN SEVERITY ALLEG CRASH WITH PROPERTY DAMAGE? --- Select ----- Select ---SUBJECT VEHICLE CRASH WITH: --- Select ---PRE-CRASH MOVEMENT PRE-CRASH MOVEMENT GENERAL DAMAGE / CONTACT AREA GENERAL DAMAGE / CONTACT AREA - Select ----- Select ---ANY AIR BAGS DEPLOYED? ANY AIR BAGS DEPLOYED? Select ------ Select ---WAS VEHICLE TOWED? WAS VEHICLE TOWED? -- Select ---☐ UNK -- Select ---☐ UNK PRE-CRASH SPEED (mph) WERE ALL PASSENGERS BELTED? - Select ---Post-Crash Information REPORTING ENTITY OR MANUFACTURER INVESTIGATING? LAW ENFORCEMENT INVESTIGATING? INVESTIGATING AGENCY DATA AVAILABILITY Complaints EDR --- Select ---Telematics Other ☐ No Data ☐ Video UNK INVESTIGATOR PHONE UNK INVESTIGATOR EMAIL UNK CBI WAS VEHICLE WITHIN ITS ODD AT THE TIME OF THE INCIDENT? INVESTIGATOR NAME Police Report Unknown (XXX) XXX-XXXX --- Select ---Narrative Provide a written description of the pre-crash, crash, and post-crash details, including the direction(s) of travel, if known. Provide explanations for any responses indicating see Narrative. List all ADAS or ADS features engaged prior to the incident, describe any ADAS or ADS feature disengagements, if known. Indicate if this is an update to a previously submitted report and, if so, provide the previous report's REPORT ID. If you selected Media as a source in the Incident Information section, provide the URL or reference. Provide any other available information. NARRATIVE 3500 characters remaining

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