

**RULES FOR THE USE
OF VEHICLES ON COUNTY
BUSINESS**

County of San Luis Obispo
County Code Section 2.84.010

September 2008

ORDINANCE NO. 3153

USE OF VEHICLES ON COUNTY BUSINESS

The Board of Supervisors of the County of San Luis Obispo, State of California, does ordain as follows:

SECTION I. That Section 2.84.010 of the County Code be amended as follows:

The following rules and regulations shall govern the use of vehicles on County business:

(1) County officers and employees shall use, or permit the use of, County vehicles only for the conduct of County business, unless an exception to this requirement is granted in the Rules for Use of Vehicles on County Business.

(2) When not in use on County business, all County vehicles shall at all times be kept on County property or at a County approved site, unless an exception to this requirement is granted in the Rules for Use of Vehicles on County Business.

(3) All County vehicles shall bear visibly on the outside the emblem of the County of San Luis Obispo and the County vehicle number. The County Administrative Officer, Sheriff and District Attorney are permitted to authorize the use of unmarked vehicles for investigative/undercover/preservation of confidentiality purposes.

(4) County department heads shall provide all their employees with a copy of the Rules for Use of Vehicles on County Business and ensure that all employees annually review these Rules. The County Administrative Officer will update the Rules as necessary and submit the changes to the Board of Supervisors for approval.

(Ord. 1777 § 1 (2), 1977: Ord. 1050 § 3 (part), 1969: Ord. 559 § 1 (part), 1961: prior code § 3-020)

SECTION II. This ordinance shall take effect and be in full force and effect thirty (30) days after its passage and before the expiration of fifteen (15) days after passage of this ordinance, after passage of this ordinance, it shall be published once with the names, of the members of the Board of Supervisors voting for and against the ordinance in a newspaper of general circulation published in the County of San Luis Obispo, State of California.

Introduced at a regular meeting of the Board of Supervisors held on the 24th day of June, 2008, and passed and adopted by the Board of Supervisors of the County of San Luis Obispo, State of California, on the 22nd day of July, 2008, by the following roll call vote, to wit:

AYES: Supervisors K.H. 'Katcho' Achadjian, Harry L. Oritt, Bruce S. Gibson,
Jerry Lenthall, Chairperson James R. Patterson

NOES: None

ABSENT: None

JAMES R. PATTERSON

Chairperson of the Board of Supervisors
of the County of San Luis Obispo

State of California

ATTEST:

JULIE L. RODENWALD

County Clerk and Ex-Officio Clerk of
the Board of Supervisors, County of
San Luis Obispo State of California

By: C.M. CHRISTENSEN Deputy Clerk

APPROVED AS TO FORM AND LEGAL EFFECT:

Wyatt Cash

By: [Signature]
Deputy County Counsel

Dated: 6/5/08

Evidence of Insurance

The County of San Luis Obispo is self-Insured for automobile liability. All questions regarding automobile insurance coverage for the County should be directed to Risk Management, a division of the Human Resources Department, at (805) 781-5959. Please accept this notice as evidence of insurance.

Rules for Use of Vehicles on County Business

Table of Contents

I. General Information.....	Page 1
A. Authority.	
B. Enforcement.	
C. Violations.	
D. CDF/County Fire.	
II. County Driver Authorization.....	Page 1
A. Obtaining driving privileges.	
B. Retaining driving privileges.	
III. Driving on County Business.....	Page 2
A. Employee Rules.	
1. Traffic laws.	
2. Prohibition on alcohol, drugs & other substances that could impair safe vehicle operation.	
3. Cell phone use.	
4. Use of seat belts/child safety seats.	
5. Defensive driver training.	
IV. Use of County Owned Vehicles for County Business.....	Page 2
A. Authorized Users.	
1. Authorized users of County vehicles.	
2. Authorized uses of County vehicles.....	Page 3
3. Authorized passengers in County vehicles.	
4. Authorized exceptions to County vehicle use.	
5. Authorized exceptions to passenger transport in County vehicles.	
B. Insurance.	
1. Evidence of Insurance.	
C. Out of State Approval.	
1. Out of state approval.	
D. Vehicle Operation.	
1. Visual inspections.	
2. Vehicle operation.....	Page 4
3. Vehicle condition.	
4. Parking County vehicles.	
5. Smoking.	
6. Fueling vehicles.	

- E. Department of Transportation Reporting.
 - 1. DOT driver records.
 - 2. Biennial Inspection of Terminal (B.I.T. Inspections).
- F. Miscellaneous Information.
 - 1. Insurance for rental vehicles.

V. Use of Private Vehicles for County Business.....Page 5

- A. Insurance requirements.
- B. Primary insurance coverage.
- C. Mileage reimbursement claims.
- D. Current Memorandum of Understandings.

VI. Reporting Vehicle Collisions, Incidents or Damage.....Page 5

- A. Employee rules.
 - 1. Reporting.
 - 2. Accident protocol.
 - 3. Department of Motor Vehicle (DMV) SR-1 report...**Page 6**
 - 4. Department of Transportation (DOT) drug testing requirements.

VII. Take Home County Vehicles.....Page 6

- A. Parking requirement exceptions.
- B. Partial or full-time take home County vehicle approval.
- C. Approval criteria.....**Page 7**
- D. Temporary take home County vehicle use.
- E. IRS reporting for take home vehicles.....**Page 8**

Rules for Use of Vehicles on County Business

I. General Information

A. Authority. The Rules for Use of Vehicles on County Business are established pursuant to County Code Section 2.84.010.

B. Enforcement. Department Heads are responsible for enforcing the Rules for Use of Vehicles on County Business.

C. Violation. Any violation of the Rules for Use of Vehicles on County Business may be cause for disciplinary action.

D. CAL FIRE / County Fire. Vehicle Use Rules for CAL FIRE are governed by the California Department of Forestry and Fire Protection. CAL FIRE'S Vehicle Use Rules are generally consistent with the County's Vehicle Use Rules. However, should there be a conflict between the Rules; CAL FIRE'S Vehicle Use Rules will take precedence.

II. County Driver Authorization

A. In order to obtain driving privileges:

1. At the time of hire, departments will provide every new employee with a copy of the Rules for Use of Vehicles on County Business. Further, the department will provide Risk Management with a completed "Authorized County Driver/Emergency Information" form contained in the employee new hire packet (see attachment 1) and an executed Rules review statement (see attachment 2).

B. In order to retain driving privileges:

1. Employees must possess the appropriate valid State of California driver's license. Risk Management will advise departments of all license suspensions through information obtained from the Department of Motor Vehicles.

2. Employees must annually review the Rules of Use of Vehicles on County Business and execute a statement acknowledging their review and agreement to comply with the Rules (see attachment 2). Departments are responsible for insuring the review is completed at the time of hire and annually thereafter. The signed statements will be placed in the employee's departmental personnel file.

3. Employees must comply with the Rules for Use of Vehicles on County Business.

III. Driving on County Business

A. All employees who drive a County vehicle or privately owned vehicle on County business must comply with the following:

1. **Traffic laws.** All employees driving on County business must observe all traffic laws at all times. All fines and penalties for a vehicle violation while on County business are the personal responsibility of the driver. Emergency vehicle operators must comply with appropriate traffic laws and department policies governing emergency response.

2. **Prohibition on alcohol, drugs & other substances that could impair safe vehicle operation.** Employees are not to drive on County business under the influence of alcohol, drugs, or other substances that could impair the employee's ability to operate a vehicle safely.

3. **Cell phone use.** All employees driving on County business will remain attentive at all times. Use of cellular phones should be limited to work related calls. Emergency vehicle operators will comply with state law and department policy regarding use of cellular phones.

4. **Use of seat belts/child safety seats.** All County vehicles and private vehicles used for County business will be equipped with seat belts. All occupants of these vehicles will use the seat belts provided when the vehicle is in motion. All children will be properly restrained in the appropriate child safety seat. Emergency vehicle operators and occupants shall comply with state law and department policy regarding use of seat belts.

5. **Defensive driver training.** All employees who routinely (i.e., 3 or more times per week) drive vehicles for County business will participate in defensive driving classes offered through Risk Management at least once every four years. Departments subject to more stringent defensive driver training requirements (i.e., POST requirements for law enforcement personnel, etc.) are exempt from this provision.

IV. Use of County Owned Vehicles for County Business

A. Authorized Users

1. **Authorized users of County vehicles.** All elected officials, permanent employees, temporary employees, contract employees, interns and formally recognized volunteers of the County are authorized to use County vehicles.

2. Authorized uses of County vehicles. With the exception noted in section IV, A. 4. of these Rules, County vehicles can only be used for official County business. Employees are liable for payment of all damages that arise out of an accident involving the use of a County vehicle for non-County business.

3. Authorized passengers in County vehicles. With the exception noted in IV, A. 5., all passengers in County vehicles must be a party to official County business. Family members, friends, acquaintances, et al, cannot be provided a ride in a County vehicle, even for short distances, unless their presence in the vehicle is related to official County business. This requirement also applies to all vehicles rented by the County, in the County's name, for County business. This requirement does not apply if an employee rents a vehicle in the employee's name for County business.

4. Authorized exceptions to County vehicle use. Employees engaged in work activities that make it impractical to retrieve their private vehicles (i.e., field personnel assigned to remote locations, employees on business travel, emergency personnel on call out, etc.) can use their County vehicle to procure meals and carry out incidental errands. Employees should select a food establishment that is in close proximity to their work location. Incidental errands must be limited to errands that are on the way to or from, or in close proximity to the employee's work location.

5. Authorized exceptions to passenger transport in County vehicles. The County Administrative Officer can make exceptions to the passenger transport policy identified in Section IV. A. 3. of this policy if it is determined to be in the County's best interest.

B. Insurance

1. Evidence of insurance. The County of San Luis Obispo is self-insured. All inquiries regarding insurance should be directed to Risk Management.

C. Out of State Approval

1. Out of state approval. County vehicles can only be driven out of state if advanced approval is obtained from the department head.

D. Vehicle Operation

1. Visual inspections. Before operating a County vehicle, a visual inspection should be conducted to identify any safety problems (e.g., under-inflated tires, malfunctioning lights, etc.). All safety issues must be reported to the appropriate garage (General Services Agency or Public Works) upon discovery. Further, all

vehicles with safety related deficiencies must be taken out of service until corrected.

2. **Vehicle operation.** All County vehicles must be operated in a responsible manner, consistent with the intended use of the vehicle.

3. **Vehicle condition.** County vehicles must be maintained in a neat and orderly manner, free of trash in trunk, floors, and seats. No items will be stored on the dash or rear window ledge.

4. **Parking County vehicles.** All County vehicles must be legally and safely parked and locked when unattended.

5. **Smoking.** Smoking is prohibited in all owned, leased or operated County vehicles.

6. **Fueling vehicles.** County vehicles should be refueled at the County's facilities on Kansas Ave. If this is not practical, vehicles should be refueled using General Services Agency approved credit cards located in the glove compartment of the vehicle. Employees should purchase regular grade fuel.

E. Department of Transportation Reporting

1. **DOT driver records.** Departments are responsible for maintaining accurate records of employees who are required by the Department of Transportation (DOT) regulations to have a commercial driver's license. At a minimum, the record will include a copy of the employee's driver's license, documentation of the employee's current medical card expiration date, and a copy of the most recent DMV Driver Record Information.

2. Biennial Inspection of Terminal (B.I.T. Inspections).

Departments are responsible for insuring that all County vehicles subject to Section 34500 of California Vehicle Code receive B.I.T. inspections every 90 days. B.I.T. inspection records will be maintained by the appropriate department and Fleet Services for as long as the County owns the vehicle.

F. Miscellaneous Information

1. **Insurance for rental vehicles.** If a vehicle is rented for business travel by the County, employees are directed not to purchase insurance offered by car rental companies.

V. Use of Private Vehicles for County Business

A. Insurance requirements. Employees must maintain automobile insurance that complies with the State of California's minimum insurance requirements for bodily injury and property damage.

B. Primary insurance coverage. If an employee is involved in a collision or an incident in a privately owned vehicle, while on authorized County business, the employee's automobile insurance is considered primary.

C. Mileage reimbursement claims. When traveling in a privately owned vehicle on County business, all employees will be reimbursed for mileage expenses at the current published IRS reimbursement rates. Claims for mileage reimbursement will be submitted and processed in accordance with the County Travel Policy. Claims for mileage reimbursement submitted by employees who receive a monthly vehicle allowance will be submitted and processed in accordance with the County's Resolution regarding vehicle allowance benefits.

D. Current Memorandum of Understandings (MOUs). The County acknowledges that language contained in MOUs with certain employee groups governs the County's ability to require employees to use their own vehicles for County business.

VI. Reporting Vehicle Collisions, Incidents or Damage

A. All employees who drive a County vehicle or privately owned vehicle on County business must comply with the following rules:

1. **Reporting.** All collisions or vehicle damage involving a County vehicle, or a privately owned vehicle being used on County business, regardless of severity, must be reported to the employee's supervisor, the appropriate garage (General Services Agency or Public Works), and Risk Management using the "Report of Vehicle Accident" form (see attachment 3). These forms are located in the glove compartment of the vehicle or on Human Resource's intra-net site. The accident reports must be filled out accurately, completely, and legibly and routed to the appropriate garage, Risk Management and the employee's department head within 24 hours of the incident. If the employee is unable to prepare the report due to injury, the appropriate department supervisor will take responsibility for this task.

2. **Accident protocol.** Assuming the employee is not seriously injured (i.e., does not require immediate medical attention), the employee is responsible for:

- Contacting the appropriate law enforcement agency to request a traffic collision report;
- Obtaining the name, address, telephone number, driver's license number and insurance company name and phone number of any party to the accident; and
- Obtaining names and phone numbers of any witnesses to the accident.

Please note that disposable cameras have been placed in the glove compartment of all County vehicles. These cameras should be used to document all damage to the County vehicle and the other party's vehicle, as well as any conditions at the accident scene deemed important by the employee (e.g., road conditions, unusual shrubbery, etc.).

3. Department of Motor Vehicle (DMV) SR-1 report. This report (see attachment 4) is required by the DMV whenever an individual is involved in a vehicle accident that results in property damage (at dollar thresholds established by DMV), personal injury or loss of life. The report must be filled out regardless of fault and within ten days of the accident. It is the employee's responsibility to comply with this DMV requirement.

4. Department of Transportation (DOT) drug testing requirements. After an accident, it is the Department's responsibility to insure that the appropriate drug testing is carried out in accordance with the County's Drug and Alcohol Policy as required by the DOT.

VII. Take Home County Vehicles

A. Parking requirement exceptions. All County vehicles, when not in use on County business, will be parked on County property, unless a formal exception to this requirement is granted as set out in Section VII. B and C of these Rules or a department head authorizes a temporary use as set out in Section VII. D of these rules.

B. Partial or full-time take home County vehicle approval. The District Attorney and Sheriff are responsible for approving all partial and full-time requests for take home vehicles for their respective departments; the County Administrative Officer approves all partial and full-time requests for the balance of County departments. The District Attorney, Sheriff and the County Administrative Officer annually review all partial and full-time requests to take County vehicles home for work related purposes. No partial or full-time take home vehicle request will be approved without a written justification

demonstrating compliance with these Rules and written certification of that compliance by the appropriate department head. The District Attorney and Sheriff will annually provide the County Administrative Officer with a listing, along with the associated justifications, of all vehicles approved for take home use on a partial or full-time basis. The County Administrative Officer, in turn, will annually submit the listing of all vehicles approved for take home use on a partial and fulltime basis to the Board of Supervisors for informational purposes.

C. Approval criteria.

1. Take home vehicle assignments requiring County Administrative Officer approval. Requests for partial or full-time take home vehicle assignments approved by the County Administrative Officer can only be authorized for specially equipped vehicles required for first line after hours emergency response to problems that, without immediate action, could result in serious operational problems, health and/or safety hazards, and/or extensive property damage. "Specially equipped vehicles" refers to those vehicles outfitted with critical tools, equipment and/or gear that allow an employee to respond directly to the incident, without first reporting to the worksite. Partial-time assignments are granted to address departments: 1) after hour call out and stand by requirements, or 2) short-term emergency period needs (e.g., a storm with flood potential, etc.). Full-time assignments (i.e., vehicles taken home on daily basis throughout year of authorization) are granted to address departments' routine, after hour emergency response needs. For purposes of these Rules, "routine" is defined as at least twenty-six after hour emergency response call outs per year.

Take home vehicle assignments will not be granted for the purpose of compensating an employee, or for the employee's convenience or title.

2. Take home vehicle assignments requiring District Attorney and Sheriff approval. The District Attorney and Sheriff will develop written approval criteria for all partial and full-time take home vehicle assignments. The criteria will be submitted to the County Administrative Officer annually and used to satisfy Section VII. B of these Rules.

D. Temporary take home County vehicle use. Department heads can authorize employees to take home County vehicles on a temporary use basis when it makes good business sense for the County. For example, if an engineer lives in Paso Robles and must inspect a project in north County first thing in the morning, it is more efficient to allow the employee to take the vehicle home and respond directly to the work site in north County.

E. IRS reporting for take home vehicles. Each year, in accordance with IRS regulations, department heads are required to certify to the Auditor-Controller the names of the employees and the number of trips the employee commuted to and/or from work during the calendar year. This information is annually compiled by the Auditor-Controller and reported to the IRS as prescribed by law.

Attachments

- 1 – Authorized County Driver / Emergency Information
- 2 – Annual Review of Rules – Employee Acknowledgement
- 3 – Accident Accident/Incident Report
- 4 – DMV SR-1 Report

Please note: Electronic versions of these forms can be found on the Human Resources intra-net website.

<http://myslo.intra/HR/Forms>

COUNTY OF SAN LUIS OBISPO
RISK MANAGEMENT

AUTHORIZED COUNTY DRIVER/EMERGENCY
INFORMATION

PLEASE COMPLETE FOR ALL EMPLOYEES/VOLUNTEERS

NAME:		
LOCAL MAILING ADDRESS:		
TELEPHONE NO.:	DATE OF BIRTH:	
DRIVER'S LICENSE NO:	EXPIRATION DATE:	CLASS:
AUTO INSURANCE CO.:	AUTO POLICY NO.:	
DRIVING RESTRICTIONS: _____		

DEPARTMENT:	JOB CLASSIFICATION:
-------------	---------------------

IN THE EVENT OF AN EMERGENCY, PLEASE NOTIFY:

Name: _____	Telephone: _____
Address: _____	
Relationship to Employee: _____	

Employee's Signature Date Department Authorization Date

ATTACHMENT 1

**Rules for the Use of Vehicles on County Business
Annual Employee Review**

I have reviewed San Luis Obispo County's "Rules for the Use of Vehicles on County Business" and understand that whenever I operate a County vehicle or drive a privately owned vehicle on County business I must do so in accordance with these rules. Further, I agree to comply with the following key elements of the County's Vehicle Use Rules:

- All drivers must possess a valid California driver's license. (Initial:)

- County vehicles can only be operated for County business. The only exceptions to this policy are noted in Section IV. A. 4 of the Rules. (Initial:)

- County employees are prohibited from carrying passengers in a County vehicle who are not a party to County business. This means family members, friends, acquaintances, etc. cannot be provided a ride in a County vehicle -- even for short distances -- unless their presence in the vehicle is related to County business. The only exception to this policy is noted in Section IV. A. 5 of the Rules. (Initial:)

- Employees are liable for payment of all damages that arise out of an accident involving the use of a County vehicle for non-County business. (Initial:)

- Failure to comply with these rules can result in disciplinary action against the employee. (Initial:)

Employee Name (print): _____

Employee Signature: _____

Date: _____

ATTACHMENT 2

ATTACHMENT 3

COUNTY OF SAN LUIS OBISPO
REPORT OF VEHICLE ACCIDENT/INCIDENT/DAMAGE
 Original to Risk Management * Copy to County Garage * Copy to Department File
 THIS REPORT MUST BE TURNED IN WITHIN 24 HOURS AFTER ACCIDENT

Traffic Collision Report
 Prepared yes no
 Officer Name/Report No.:

COUNTY DRIVER	NAME	AGE	ACCIDENT DATE	POSITION	BUSINESS PHONE	EMPLOYING DEPT
	HOME STREET ADDRESS	CITY, ZIP CODE	HOME PHONE	BUSINESS PHONE	YEARS WITH DEPT	
	DRIVER'S LICENSE NO.	EXPIRATION DATE	WAS VEHICLE BEING USED ON OFFICIAL BUSINESS	YES NO	HAVE YOU HAD A PREVIOUS ACCIDENT WHILE DRIVING ON COUNTY BUSINESS?	YES NO
	VEHICLE LICENSE NO.	YEAR/MODEL	MAKE	BODY TYPE	COUNTY VEHICLE NO.	DAMAGING DEPARTMENT
	VEHICLE EXAMINED BY COUNTY GARAGE	YES NO	IF SO, BY WHOM	WAS THE VEHICLE DAMAGED? IF SO, PLEASE DESCRIBE FULLY.		
	VEHICLE LICENSE NO.	YEAR/MODEL	MAKE	BODY TYPE		
	WAS VEHICLE DAMAGED? IF SO, PLEASE DESCRIBE FULLY.					
PRIVATE VEHICLE	VEHICLE LICENSE NO.	YEAR/MODEL	MAKE	BODY TYPE	DRIVER'S LICENSE NO.	STATE LICENSE ISSUED BY
	REGISTERED OWNER NAME	REGISTERED OWNER'S ADDRESS		HOME PHONE NO.	WORK PHONE NO.	
	DRIVER'S NAME	DRIVER'S ADDRESS		HOME PHONE NO.	WORK PHONE NO.	
	OWNER'S DRIVER'S INSURANCE COMPANY	INSURANCE CO.'S PHONE NO.	INSURANCE CO.'S POLICY NO.			
	WAS OTHER VEHICLE DAMAGED? IF SO, PLEASE DESCRIBE FULLY.					
OTHER VEHICLE	LOCATION					
	CITY		COUNTY		TIME	
ACCIDENT	ON WHICH SIDE OF THE ROAD WERE YOU DRIVING	LEFT	RIGHT	CTR	DISTANCE FROM CURB	APPROXIMATE ROAD WIDTH
	SPEED OF YOUR VEHICLE	SPEED OF OTHER VEHICLE		ROAD CONDITIONS		WEATHER CONDITIONS
	FULLY DESCRIBE ACCIDENT AND GIVE DETAILS OF HOW IT OCCURRED					

		WERE YOU CITED		YES	NO	HAS OTHER DRIVER CITED		YES	NO
								HOSPITAL TAKEN TO	
AFTER ACCIDENT		NAME OF INJURED	AGE	ADDRESS				HOSPITAL TAKEN TO	
		NAME OF INJURED	AGE	ADDRESS				PHONE NUMBER	
		NAME		ADDRESS				PHONE NUMBER	
		NAME		ADDRESS				PHONE NUMBER	
		NAME		ADDRESS				PHONE NUMBER	
		NAME		ADDRESS				PHONE NUMBER	
		NAME		ADDRESS				PHONE NUMBER	
		NAME		ADDRESS				PHONE NUMBER	
		NAME		ADDRESS				PHONE NUMBER	
		NAME		ADDRESS				PHONE NUMBER	
		NAME		ADDRESS				PHONE NUMBER	
		NAME		ADDRESS				PHONE NUMBER	
ADDTL OCCUPANTS OF VEHICLES		NAME		ADDRESS				PHONE NUMBER	
DIAGRAM OF ACCIDENT									

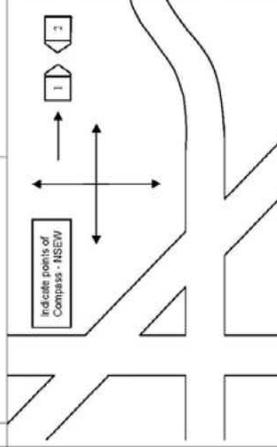
The responses in this report contain a true and full account of the accident or incident, and the vehicle was being operated on official business of the County, and/or under the custody/control of the designated department at the time of the accident or incident. If there is any property of damage, the reviewing supervisor is to explain any discrepancy. Attach extra pages as necessary.

Signature of Employee _____ Date _____

Signature of Dept. Head or Designated Representative _____

Type or Print Name and Title of Reviewing Supervisor _____

- Number County vehicle as 1, other vehicle as 2
- Show pedestrian by 0
- Show railroad by +-----+
- Show direction of travel as follows:
Before accident ----->
After accident <-----
- Indicate names or numbers of streets or roads





REPORT OF TRAFFIC ACCIDENT OCCURRING IN CALIFORNIA

DMV USE ONLY

A Public Service Agency

READ IMPORTANT INFORMATION ON BACK

AS APPROPRIATE, PLEASE TYPE OR PRINT IN BOXES

	# OF VEHICLES	DATE OF ACCIDENT	ACCIDENT LOCATION - CITY/COUNTY (CALIFORNIA ONLY)		ON PRIVATE PROPERTY <input type="checkbox"/> Yes <input type="checkbox"/> No	
REPORTING PARTY'S INFORMATION	TIME OF ACCIDENT	<input type="checkbox"/> AM Hour <input type="checkbox"/> PM	<input type="checkbox"/> Moving <input type="checkbox"/> Stopped in Traffic <input type="checkbox"/> Parked <input type="checkbox"/> Pedestrian <input type="checkbox"/> Bicyclist <input type="checkbox"/> Other (E.G., ROLLAWAY)			DRIVING FOR EMPLOYER <input type="checkbox"/> Yes <input type="checkbox"/> No
	DRIVER'S NAME (FIRST, MIDDLE, LAST)	DRIVER LICENSE NUMBER			STATE	
	DRIVER'S STREET ADDRESS				DATE OF BIRTH	
	CITY	STATE	ZIP CODE	TELEPHONE NUMBERS Wk () Hm ()		
	VEHICLE (YEAR AND MAKE)	VEHICLE LICENSE PLATE OR VEHICLE IDENTIFICATION NUMBER			STATE	DAMAGES OVER \$750 <input type="checkbox"/> Yes <input type="checkbox"/> No
	VEHICLE OWNER—PERSON OR COMPANY				DATE OF BIRTH	
	ADDRESS			CITY	STATE	ZIP CODE
	INSURANCE COMPANY NAME (NOT AGENT OR BROKER) AT THE TIME OF THE ACCIDENT			POLICY NUMBER		
	COMPANY NAIC NUMBER	POLICY PERIOD	POLICY HOLDER NAME			
		From: _____ To: _____				
OTHER PARTY'S INFORMATION	<input type="checkbox"/> Moving <input type="checkbox"/> Stopped in Traffic <input type="checkbox"/> Parked <input type="checkbox"/> Pedestrian <input type="checkbox"/> Bicyclist <input type="checkbox"/> Other (E.G., ROLLAWAY)					DRIVING FOR EMPLOYER <input type="checkbox"/> Yes <input type="checkbox"/> No
	DRIVER'S NAME (FIRST, MIDDLE, LAST)				DRIVER LICENSE NUMBER	STATE
	DRIVER'S STREET ADDRESS					DATE OF BIRTH
	CITY	STATE	ZIP CODE	TELEPHONE NUMBERS Wk () Hm ()		
	VEHICLE (YEAR AND MAKE)	VEHICLE LICENSE PLATE OR VEHICLE IDENTIFICATION NUMBER			STATE	DAMAGES OVER \$750 <input type="checkbox"/> Yes <input type="checkbox"/> No
	VEHICLE OWNER—PERSON OR COMPANY					DATE OF BIRTH
	ADDRESS			CITY	STATE	ZIP CODE
	INSURANCE COMPANY NAME (NOT AGENT OR BROKER) AT THE TIME OF THE ACCIDENT			POLICY NUMBER		
	COMPANY NAIC NUMBER	POLICY PERIOD	POLICY HOLDER NAME			
		From: _____ To: _____				
INJURY/DEATH PROPERTY DAMAGE	NAME AND ADDRESS OF INDIVIDUAL INJURED OR DECEASED				<input type="checkbox"/> Injured <input type="checkbox"/> Driver <input type="checkbox"/> Passenger <input type="checkbox"/> Deceased <input type="checkbox"/> Bicyclist <input type="checkbox"/> Pedestrian	
	NAME AND ADDRESS OF INDIVIDUAL INJURED OR DECEASED				<input type="checkbox"/> Injured <input type="checkbox"/> Driver <input type="checkbox"/> Passenger <input type="checkbox"/> Deceased <input type="checkbox"/> Bicyclist <input type="checkbox"/> Pedestrian	
	OTHER PROPERTY DAMAGED (TELEPHONE POLES, FENCE, LIVESTOCK, ETC.)				DAMAGES OVER \$750 <input type="checkbox"/> Yes <input type="checkbox"/> No	
	PROPERTY OWNER'S NAME AND ADDRESS					

I certify under penalty of perjury under the laws of the State of California that the information entered on this document is true and correct.

DATE	PRINTED NAME	SIGNATURE X
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SR 1 (REV. 5/2005) WWW

ADDITIONAL INFORMATION ATTACHED

IMPORTANT INFORMATION

California law requires *traffic accidents* on a California street/highway or private property to be reported to the Department of Motor Vehicles (DMV) within 10 days if there was an injury, death or property damage. Untimely reporting could result in DMV suspending a driver license. Accidents occurring on December 31, 2002, or prior must result in damages to *any one person's property* in excess of \$500, and accidents occurring on **January 1, 2003, or after** must result in damages in excess of \$750 to be reported. Accidents involving vehicles *not required to be registered* such as an off-road vehicle (OHV), implement of husbandry, or snowmobile or occurring on a military base or occurring on the driver's *own* property involving *only* the personal property of the driver *and* there was no injury or death are not reportable.

The law requires the driver to file this **SR-1 form** with DMV **regardless of fault**. This report must be made in addition to any other report filed with a law enforcement agency, insurance company, or the California Highway Patrol (CHP) as their reports **do not** satisfy the filing requirement. An insurance agent, attorney, or other designated representative may file the report for the driver.

The law requires every driver and every owner of a motor vehicle to be "financially responsible" for any injury or damage resulting from operating or owning a motor vehicle. The minimum insurance level for "financial responsibility" is **public liability and property damage coverage** of \$15,000 for injury or death of one person, \$30,000 for injury or death of two or more persons and \$5,000 property damage per accident. Comprehensive and collision insurance **does not meet the legal requirement**.

§1806 of the California Vehicle Code (CVC) requires the DMV to record accident information **regardless of fault** when individuals report accidents under the Financial Responsibility Law or if law enforcement agencies or CHP investigate and make a report.

WHEN COMPLETING THIS FORM...

Please print within the spaces and boxes on this form. If you need to provide additional information on a separate piece of paper(s) you include a *copy* of any law enforcement agency report, please check the box to indicate 'Additional Information Attached'. **If you are the passenger reporting the accident**, be sure to identify yourself by using the 'other' box and stating 'passenger' in the explanation.

- Write **unk (for unknown)** or **none** in any space or box when you do not have information on the other party involved.
- Give insurance information that is complete and which *correctly and fully* identifies the **company** that *issued* the policy.
- Place the correct National Association of Insurance Commissioners (NAIC) number for your insurance company in the boxes provided. The NAIC number should be located on your insurance ID card or you can contact your insurance agent or company for the information.
- Identify any person involved in the accident (driver, passenger, bicyclist, pedestrian, etc.) who you saw was injured *or* complained of bodily injury or know to be deceased.
- Record in the OTHER PROPERTY DAMAGED section any damage to telephone poles, fences, street signs, guard posts, trees, livestock, dogs, etc., meeting the filing requirement, including amount. *This may require that you contact the owner of the property for an estimate of damages.*
- Once you have completed this report, please mail it to:

DEPARTMENT OF MOTOR VEHICLES
FINANCIAL RESPONSIBILITY
MAIL STATION J237
P.O. BOX 942884
SACRAMENTO, CA 94284-0884

DMV does not accept reports or take actions against non-reporting or uninsured motorists unless this SR-1 form is sent to DMV by someone involved in the accident or their designee and the report is received by DMV *within one calendar year of the accident date*.

ADVISORY STATEMENT

The accident information on the SR-1 is required under the authority of Divisions 6 and 7 of the California Vehicle Code. Failure to provide the information will result in suspension of the driving privilege. Except as made confidential by law (e.g., medical information) or exempted under the Public Records Act, the information is a public record, is regularly used by law enforcement agencies and insurance companies, and is open to public inspection. §16005 CVC limits the public record for SR-1 reports to accident involvement, but does allow persons with a proper interest (involved drivers, their employers, etc.) to receive specified information. Individuals may inspect or obtain copies of information contained in their records during regular office hours. The Financial Responsibility Section Manager, 2570 24th Street, Sacramento, CA 95818 (telephone number: 916-657-6677) is responsible for maintaining this information.