

UNITED STATES DEPARTMENT OF  
TRANSPORTATION  
NATIONAL HIGHWAY TRAFFIC SAFETY  
ADMINISTRATION  
Standing General Order 2021-01  
Appendix C - Incident Report

REPORT TYPE: 10-Day Update

REPORT MONTH & YEAR: [REDACTED]

NHTSA PROVIDED REPORT ID: 30610-7578-2

THIS REPORT IS AN UPDATE TO: 7578

Subject Vehicle Information

VIN and/or S/N (N/A Not applicable) <input type="checkbox"/> UNK	MAKE: Toyota	MODEL: Highlander	MODEL YEAR: 2019	MILEAGE: 59843
VIN: 5TDDGRFH3KS [REDACTED]	DRIVER / OPERATOR TYPE: In-Vehicle (Commercial / Test)	ADS EQUIPPED?: Yes		
S/N: N/A	OPERATING ENTITY: Zoos <input type="checkbox"/> UNK	AUTOMATION SYSTEM ENGAGED AT THE TIME OF THE INCIDENT: ADS		
OTHER ENTITIES THAT MAY BE AWARE OF THIS INCIDENT <input type="checkbox"/> UNK <input checked="" type="checkbox"/> N/A	FEDERAL STATUTORY OR REGULATORY EXEMPTION? <input type="checkbox"/> UNK <input checked="" type="checkbox"/> NO	STATE OR LOCAL PERMIT?: Yes (specify below)		
Select all that apply	Select all that apply	STATE OR LOCAL PERMIT: NV DMV AVT Permit		
ADAS / ADS SYSTEM VERSION: 241 24 04 24 <input type="checkbox"/> UNK <input type="checkbox"/> CBI	ADAS / ADS SYSTEM HARDWARE VERSION: 241 24 04 24 <input type="checkbox"/> UNK <input type="checkbox"/> CBI	ADAS / ADS SOFTWARE VERSION: 241 24 04 24 <input type="checkbox"/> UNK <input type="checkbox"/> CBI		

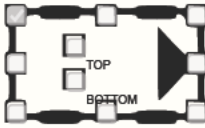
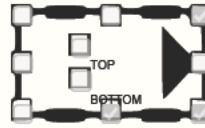
Incident Information

SOURCE: <input type="checkbox"/> Complaint / Claim <input type="checkbox"/> Law Enforcement <input type="checkbox"/> Other: [REDACTED]	INCIDENT DATE: 04/ [REDACTED] /2024 <input type="checkbox"/> UNK	INCIDENT TIME (24-hour format): 16:54 <input type="checkbox"/> UNK
<input type="checkbox"/> Telematics <input checked="" type="checkbox"/> Testing	NOTICE RECEIVED DATE: 04/ [REDACTED] /2024	
<input checked="" type="checkbox"/> Field Report <input type="checkbox"/> Media		

Incident Scene

LATITUDE (decimal): [REDACTED] <input type="checkbox"/> UNK	LONGITUDE (decimal): [REDACTED] <input type="checkbox"/> UNK	LOCATION ADDRESS / DESCRIPTION: [REDACTED] Spring Valley	CITY: [REDACTED]	STATE: NV	ZIP CODE: [REDACTED] <input type="checkbox"/> UNK
ROADWAY TYPE: Street	SURFACE CONDITION: Dry	WEATHER: <input checked="" type="checkbox"/> Clear <input type="checkbox"/> Snow <input type="checkbox"/> Unknown			
ROADWAY DESCRIPTION: No Unusual Conditions	SPEED LIMIT (mph): 45 <input type="checkbox"/> UNK	<input type="checkbox"/> Cloudy <input type="checkbox"/> Fog / Smoke <input type="checkbox"/> Other: [REDACTED]			
LIGHTING: Daylight		<input type="checkbox"/> Rain <input type="checkbox"/> Severe Wind			

## Crash Description

CRASH WITH Motorcycle		HIGHEST INJURY SEVERITY ALLEGED Minor	PROPERTY DAMAGE? Yes
SUBJECT VEHICLE		CRASH WITH Motorcycle	
GENERAL DAMAGE / CONTACT AREA  <input type="checkbox"/> UNK	PRE CRASH MOVEMENT Making Right Turn	PRE CRASH MOVEMENT Making Right Turn	GENERAL DAMAGE / CONTACT AREA  <input type="checkbox"/> UNK
	ANY AIR BAGS DEPLOYED? No	ANY AIR BAGS DEPLOYED? Not Applicable	
	WAS VEHICLE TOWED? No	WAS VEHICLE TOWED? No	
PRE CRASH SPEED (mph) <input type="checkbox"/> UNK 2	WERE ALL PASSENGERS BELTED? Yes		

## Post-Crash Information

<b>DATA AVAILABILITY</b> <input type="checkbox"/> EDR <input checked="" type="checkbox"/> Telematics <input checked="" type="checkbox"/> Video <input type="checkbox"/> Police Report <input type="checkbox"/> Complaints <input type="checkbox"/> Other <input type="checkbox"/> No Data <input type="checkbox"/> Unknown	LAW ENFORCEMENT INVESTIGATING? <input type="checkbox"/> UNK No	INVESTIGATING AGENCY <input type="checkbox"/> UNK	REPORTING ENTITY OR MANUFACTURER INVESTIGATING? <input type="checkbox"/> UNK Yes
	INVESTIGATOR NAME <input type="checkbox"/> UNK	INVESTIGATOR PHONE <input type="checkbox"/> UNK (XXX) XXX-XXXX	INVESTIGATOR EMAIL <input type="checkbox"/> UNK

## 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 leading up to the incident, and provide reasons for the 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

CBI

A Zoox vehicle (Vehicle 1) in autonomy was traveling [REDACTED] on [REDACTED] and turning right onto [REDACTED]. While executing a low speed turn, the Zoox vehicle braked and then the operator disengaged. As the Zoox vehicle was slowing, the motorcycle (Vehicle 2) operator accelerated in an apparent attempt to overtake the Zoox vehicle. The motorcycle then struck the driver's side rear bumper and quarter panel of the Zoox vehicle and the motorcycle and the operator fell to the ground. The motorcycle sustained scrapes and the Zoox vehicle sustained minor damage to the rear bumper and trim. Both parties exchanged information. The police were not called. The motorcycle operator did not report any injuries and rode their motorcycle from the scene. Subsequently, the Zoox vehicle operator reported lower back pain/tightness. The content of this report is unchanged from the initial report and provides complete information to date for this incident.

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