

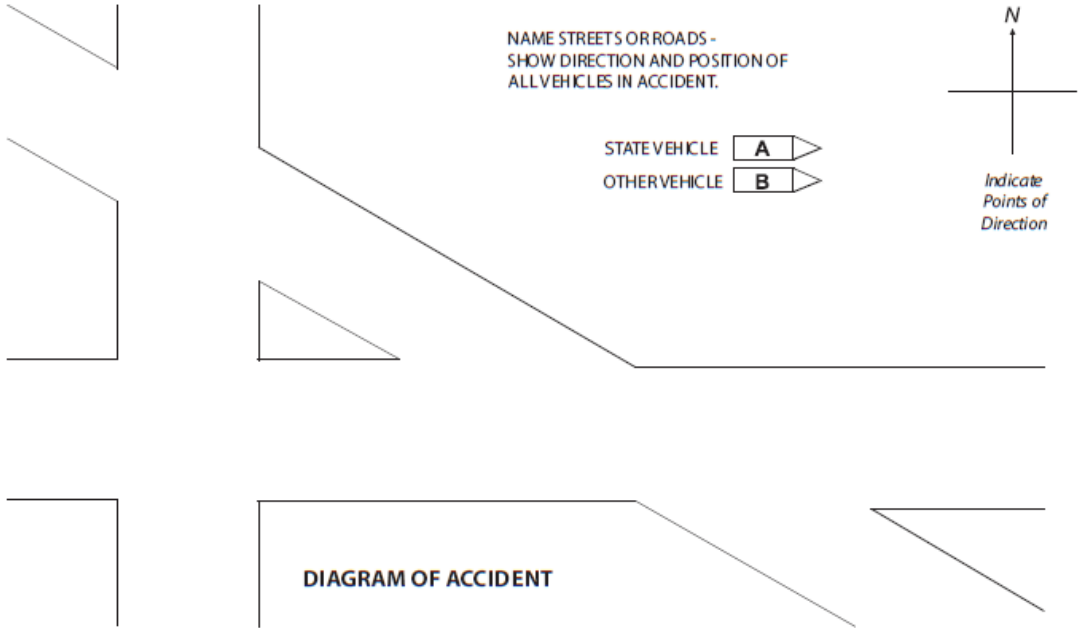
REPORTING OF AUTOMOBILE ACCIDENTS

The Office of Risk and Insurance Management (ORIM) administers the State Motor Vehicle Liability Self-Insurance Program (VELSIP). The program provides liability coverage for the state, and employees or agents of the state when operating a vehicle on official state business.

All vehicle accident reports (STD 270 and STD 274) must be received by the ORIM within 2 business days after the accident. The STD 270 must be completed by the driver and reviewed and approved by their supervisor. The vehicle accident reports, along with any additional information related to the accident should be emailed to ORIM at claims@dgs.ca.gov

DO NOT DISCUSS THE ACCIDENT WITH ANYONE EXCEPT:

- Investigating Traffic Officer
- Authorized Representatives for the State
- Supervisor
- Office of Risk and Insurance Management Claims Analysts



ACCIDENT DETAILS

Time AM/PM Date City County

Accident location (Address, Intersection, etc.) Road Conditions /Weather Conditions

INVESTIGATED BY: Police Dept. Sheriff CHP Other

Name of Investigating Agency Address Report Number

OCCUPANTS OF OTHER VEHICLE

| | | |
|------|---------|--------------|
| Name | Address | Phone Number |
| Name | Address | Phone Number |
| Name | Address | Phone Number |

OCCUPANTS OF STATE VEHICLE

| | | |
|------|---------|--------------|
| Name | Address | Phone Number |
| Name | Address | Phone Number |

STATE OF CALIFORNIA – DGS OFFICE OF RISK AND INSURANCE MANAGEMENT
ACCIDENT IDENTIFICATION STD 269 (Rev. 07/2024)

IMPORTANT

Complete the entries below, detach this card and give it to the other driver who may need the information for the financial responsibility form.

State Driver Full Name Work Phone Number Driver's License Number

Department Employed By

Date of Accident

Accident Location

State Vehicle: Year Make Model License Plate Number

Inquiries regarding the accident may be addressed to:

Department of General Services
 Office of Risk and Insurance Management
 707 Third Street, Third Floor – Suite 3-414
 West Sacramento, CA 95605 (916) 376-5300
 Email: claims@dgs.ca.gov

Reporting of Claims

All vehicle accident reports (STD 270 and STD 274) must be received by ORIM within 2 business days after the accident. The STD 270 must be completed by the driver and reviewed and approved by their supervisor. The vehicle accident reports, along with any additional information related to the accident should be emailed to ORIM at claims@dgs.ca.gov.

Office of Risk and Insurance Management

(916) 376-5300

CLAIMS@DGS.CA.GOV

Evidence of Financial Responsibility

This vehicle is owned or leased by the State of California, a public entity, and operated by employees or agents of the State. California Vehicle Code Sections 16000, 16020, 16021, et sez. State that ownership or lease of a vehicle by public entity establishes evidence of financial responsibility.

IMPORTANT

Ask names and addresses of witnesses first.

Witness 1 Name

Address

Phone Number

Witness 2 Name

Address

Phone Number

Witness 3 Name

Address

Phone Number

INJURED PERSONS

Name

DOB

Address

Phone Number

Hospital Taken To

Name

DOB

Address

Phone Number

Hospital Taken To

OTHER VEHICLES

Vehicle License No.

Year

Make

Model

Registered Owner

Address

City

Driver's Name

Address

City

Driver's License No.

Note: This accident identification card (on reverse) should be filled out, detached, and given to the other driver.