

# Survey of California Shared Mobility Device Insurance Experience

**Reporting Period: January 1, 2024 to December 31, 2025**

## **GENERAL INSTRUCTIONS**

Pursuant to Assembly Bill 371 (Jones-Sawyer), the California Department of Insurance (CDI) is conducting a study pursuant to California Civil Code Section 2505.5 concerning insurance coverage requirements applicable to shared mobility devices. The purpose of this data call is to collect information regarding insurance coverage, claims experience, and related insurance arrangements to assist CDI in evaluating the appropriateness of the coverage requirements established under Civil Code Section 2505. Insurance companies are requested to provide complete and accurate information in accordance with the instructions. The results of this study will be reported to the Legislature by December 31, 2026.

- (1) Insurers should report California experience for the applicable coverage written on an individual company basis.
- (2) Insurers should report the following coverage categories separately:
  - **Commercial General Liability (CGL)**-Statutory minimum limits are \$1,000,000 per occurrence for bodily injury or property damage, including contractual liability, personal injury, and product liability and completed operations, and \$5,000,000 aggregate for all occurrences during the policy period.
  - **Individual Liability Coverage**-Statutory minimum limits are \$10,000 per occurrence for any bodily injury or death suffered by a pedestrian and \$1,000 per occurrence for property damage to a pedestrian's assistive technology device.

(3) If your company provided insurance coverage subject to California Civil Code Section 2505 for a shared mobility service provider or its participating users during the reporting period, please complete the Signature Page, Questionnaire, Individual Claims Data Workbook, and Policy Information Exhibit Data Workbook. Please return all completed forms via e-mail to [RSBSharedMobility@insurance.ca.gov](mailto:RSBSharedMobility@insurance.ca.gov).

If your company **did not** provide insurance coverage described above during the reporting period, completion of the data call workbooks **is not** required. Please select "No", complete the applicable company information on the Signature Page, and submit only the Signature Page via e-mail to [RSBSharedMobility@insurance.ca.gov](mailto:RSBSharedMobility@insurance.ca.gov).

- (4) Completed forms are to be returned as electronic files in these formats:
- PDF: Signature Page (scanned copy of completed and signed form)
  - Excel: Questionnaire, Individual Claims Data Workbook, and Policy Information Exhibit

(5) The completed survey is due on **November 6, 2026**.

(6) If any questions regarding the completion or submission of this survey, please contact the Rate Specialist Bureau by e-mail at [RSBSharedMobility@insurance.ca.gov](mailto:RSBSharedMobility@insurance.ca.gov).