



# Autonomous Vehicle Certification Registry Operation & Registration

Company Name:

---

Application Type:

*Check all that apply*

New     Renewal     Update

**For questions please contact:**

Natalie Vargas-Murray, Manager – Occupational and Business licensing  
[nvargasmurray@dmv.nv.gov](mailto:nvargasmurray@dmv.nv.gov)

Tyler Saunders, Management Analyst – Research and Project Management  
[tpsaunders@dmv.nv.gov](mailto:tpsaunders@dmv.nv.gov)

## **Introduction**

The State of Nevada is proud to be a pioneer in leading the progression of autonomous vehicle operations on our public roadways. We are forward thinking and see the future implications of automation, we are excited to partner with you. If you believe your technology is innovative and doesn't fit into the current autonomous definitions, we encourage you to reach out to us. Together, we can determine how Nevada is able to accommodate your company and your innovative technology.

The safety of the public is always the Department of Motor Vehicles' (Department) primary concern, we require that all vehicles operating on our public roadways are capable of doing so in compliance with the applicable motor vehicle and traffic laws of this State.

## **Disclosure of Information**

Except as otherwise provided in **NAC 482A.060**, the Nevada Department of Motor Vehicles is a public agency and is subject to public record requests per **NRS 239.010**. Requests can be from any person or organization and any books, communications and records are subject to inspection or review. By law, the Department cannot withhold or redact any of the information that is requested. Proprietary information should be omitted from any and all communications with the Department.

## **Autonomous Vehicle Registry - Operations**

Please ensure that the following items are completed prior to submission. Once the Department has completed our review, we will provide a certificate of compliance. This will allow you to freely register and operate all vehicles with the same make, model, year, and technology. The certificate of compliance is separate from a motor vehicle registration, so you will still be required to visit one of our DMV offices to obtain your license plates.

### **Letter of Authorization (page 3)**

The Letter of Authorization is required to be completed and filled out by the principal agent, as determined by your company. This letter will specify the persons who are authorized to conduct business with the Department, on behalf of your company. The department will not release documents to any individual not listed on this form as an "authorized agent".

### **Autonomous Vehicle Information (page 4)**

You must list the year, make, and model for each type of vehicle you wish to certify. Once this is complete, you will not need to recertify unless the technology changes and requires you to certify that the vehicle can achieve the minimal risk condition. If new versions of previously certified makes and models are acquired and later equipped with an automated driving system, you will be required to submit another Autonomous Vehicle Certification Registry Application to the Department.

### **Autonomous Vehicle Certification (page 5)**

You must certify that all vehicles meet requirements as defined in Chapter **482A** of the Nevada Revised Statutes. If your vehicle is fully autonomous, and can achieve the minimal risk condition, please complete sections 1 & 3. If your vehicle cannot achieve the minimal risk condition, please complete sections 1 & 2.

## **Vehicle Registration – Operations**

Upon issuance of the Autonomous Vehicle Certification, the consumer may register all vehicles with the same year, make, model, and technology at any of our full-service DMV offices.

### **Nevada Insurance Requirements**

Upon registration, the consumer will need to provide a Nevada Evidence of Insurance card. The required minimum coverage for the policy must have liability insurance with a minimum coverage of \$25,000 for bodily injury or death of one person in any one accident; \$50,000 for bodily injury or death of two or more persons on any one accident; and \$20,000 for injury to or destruction of property of others in any one accident. The insurance card must be carried in your vehicle at all times and presented to any law enforcement officer upon request.

Coverage must be validated by an insurance company authorized to do business in the State of Nevada.

### **Registration Renewal**

After you receive your certificate of compliance and your vehicle registration is due to be renewed, you may renew your registration in the same manner as you would any other vehicle, provided there are no changes to the technology that require you to recertify and that you have maintained continuous insurance coverage.

# LETTER OF AUTHORIZATION

Please indicate any and all persons authorized to represent your business. **The Department will not speak with any persons not listed as an authorized agent below.** Additional agents may be added or removed at any time by the principal agent after completing this Letter of Authorization and returning it to the Department. If you need more space, please duplicate this page.

Mailing Address: \_\_\_\_\_  
Street City State Zip

Physical Address: \_\_\_\_\_  
Street City State Zip

Business Telephone Number: \_\_\_\_\_ Business Fax Number: \_\_\_\_\_

Email address: \_\_\_\_\_ (this email is where any correspondence will be sent to)

Sole Proprietorship  Partnership  LLP  LLC  Corporation Incorporated in State of \_\_\_\_\_

\_\_\_\_\_  
Printed Name of Authorized Agent

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name of Authorized Agent

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name of Authorized Agent

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name of Authorized Agent

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name of Authorized Agent

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name of Authorized Agent

\_\_\_\_\_  
Signature

I hereby authorize the changes as indicated above for my business with the Nevada Department of Motor Vehicles.

\_\_\_\_\_  
Printed Name of Principal

\_\_\_\_\_  
Signature of Principal

\_\_\_\_\_  
Date

To protect your business, notify the Department immediately of any changes to the above information.



# AUTONOMOUS VEHICLE CERTIFICATION

## SECTION (1)

I, \_\_\_\_\_, principal agent for \_\_\_\_\_, hereby certify under penalty of perjury that the following statements are true and accurate for each autonomous vehicle listed on page 4.

**Please initial next to each applicable statement.**

\_\_\_\_\_ I understand that each autonomous vehicle listed on page 4, is covered by an insurance company licensed to do business in this State.

\_\_\_\_\_ I understand that we must maintain continuous coverage that meets or exceeds Nevada's minimum liability requirements pursuant to **NRS 485.185**.

\_\_\_\_\_ Is affixed with a label pursuant to **49 C.F.R § 567.4**.

\_\_\_\_\_ Is capable of operating in compliance with all applicable motor vehicle laws and traffic laws of this State.

\_\_\_\_\_ I understand that the Department may impose an administrative fine, not to exceed \$2,500, for a violation of any provision of **Chapter 482A** under the Nevada Revised Statute or any regulation adopted pursuant thereto. It is a gross misdemeanor for any person knowingly to falsify an application to obtain a license for an autonomous vehicle or any other document submitted to or issued by the Department pursuant to **Chapter 482A**.

## SECTION (2)

Each **AUTONOMOUS** vehicle listed on page 4, which **requires a human operator** to be present inside the vehicle and seated in a position to take immediate control; must be,

\_\_\_\_\_ Equipped with a means to engage and disengage the automated driving system which is easily accessible to the human operator of the autonomous vehicle.

\_\_\_\_\_ Equipped with an indicator located inside the autonomous vehicle which indicates when the automated driving system is operating the autonomous vehicle.

\_\_\_\_\_ Equipped with a means to alert the human operator to take manual control of the autonomous vehicle if a failure of the system occurs which renders the automated driving system unable to perform the dynamic driving task relevant to its intended operation design domain.

## SECTION (3)

Each **FULLY AUTONOMOUS** vehicle listed on page 4, which **does not require a human operator** to be present inside the vehicle; must be,

\_\_\_\_\_ Capable of achieving a minimal risk condition if a failure of the automated driving system occurs which renders the autonomous vehicle unable to perform the dynamic driving task relevant to its intended operational design domain. The autonomous vehicle can achieve a reasonably safe state which may include, without limitation, bringing the autonomous vehicle to a complete stop.

\_\_\_\_\_ I understand if the technology is not able to achieve the minimal risk condition, then a human operator must be present in the vehicle and ready to take control in the event of a failure of the automated driving system.

I hereby certify, under penalty of perjury, that all statements in this certification are true and correct. I agree and understand that any misstatement of material facts may result in a certificate of compliance not being issued or delayed by the Department. I further understand that any willful and false statement or willfully unqualified statements made may be a felony and punishable pursuant to **NRS 199.145**.

\_\_\_\_\_  
Principal Agent's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Principal Agent's Printed Name and Title