

STATE OF CALIFORNIA
TRAFFIC COLLISION REPORT

SPECIAL CONDITIONS		NUMBER INJURED 2	HIT & RUN FELONY <input type="checkbox"/>	CITY Cupertino	JUDICIAL DISTRICT Santa Clara Superior		LOCAL REPORT NUMBER 15-099-0252C				
		NUMBER KILLED 0	HIT & RUN MISD. <input type="checkbox"/>	COUNTY Santa Clara	REPORTING DISTRICT C3	BEAT 74C2	DAY OF WEEK Thursday	TOW AWAY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
LOCATION	COLLISION OCCURRED ON DE ANZA BLVD				MO. DAY YEAR 4/9/2015	TIME (2400) 1450	NCIC # 4300	OFFICER I.D. 2014			
	MILEPOST INFORMATION FEET OF				GPS COORDINATES LATITUDE LONGITUDE		PHOTOGRAPHS BY: <input type="checkbox"/> NONE S. Gore				
	AT INTERSECTION WITH <input checked="" type="checkbox"/> OR 100 FEET S OF HOMESTEAD RD				STATE HWY REL. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO						
	PARTY 1		DRIVER'S LICENSE NUMBER	STATE	CLASS	AIR BAG	SAFETY EQUIP.	VEH. YR.	MAKE / MODEL / COLOR	LICENSE NUMBER	STATE
		[REDACTED]	CA	B	M	G	1998	GILLIG BUS WHITE	1006578	CA	
DRIVER		NAME (FIRST, MIDDLE, LAST) CHRISTINE LORRI HUSTEDT									
PEDESTRIAN		STREET ADDRESS [REDACTED]									
PARKED VEHICLE		CITY / STATE / ZIP [REDACTED] CA [REDACTED]									
BICYCLIST		SEX	HAIR	EYES	HEIGHT	WEIGHT	BIRTHDATE	RACE			
OTHER		HOME PHONE BUSINESS PHONE									
		INSURANCE CARRIER POLICY NUMBER									
		DIR. OF TRAVEL	ON STREET OR HIGHWAY				SPEED LIMIT				
		S	DE ANZA BLVD				40				
PARTY 2		DRIVER'S LICENSE NUMBER	STATE	CLASS	AIR BAG	SAFETY EQUIP.	VEH. YR.	MAKE / MODEL / COLOR	LICENSE NUMBER	STATE	
		[REDACTED]	CA	C							
DRIVER		NAME (FIRST, MIDDLE, LAST) GOPALAKRISHNAN N IYER									
PEDESTRIAN		STREET ADDRESS [REDACTED]									
PARKED VEHICLE		CITY / STATE / ZIP [REDACTED] CA [REDACTED]									
BICYCLIST		SEX	HAIR	EYES	HEIGHT	WEIGHT	BIRTHDATE	RACE			
OTHER		HOME PHONE BUSINESS PHONE									
		INSURANCE CARRIER POLICY NUMBER									
		DIR. OF TRAVEL	ON STREET OR HIGHWAY				SPEED LIMIT				
		N	DE ANZA BLVD								
PARTY 3		DRIVER'S LICENSE NUMBER	STATE	CLASS	AIR BAG	SAFETY EQUIP.	VEH. YR.	MAKE / MODEL / COLOR	LICENSE NUMBER	STATE	
		[REDACTED]	CA	C							
DRIVER		NAME (FIRST, MIDDLE, LAST) SARASWATHI G IYER									
PEDESTRIAN		STREET ADDRESS [REDACTED]									
PARKED VEHICLE		CITY / STATE / ZIP [REDACTED] CA [REDACTED]									
BICYCLIST		SEX	HAIR	EYES	HEIGHT	WEIGHT	BIRTHDATE	RACE			
OTHER		HOME PHONE BUSINESS PHONE									
		INSURANCE CARRIER POLICY NUMBER									
		DIR. OF TRAVEL	ON STREET OR HIGHWAY				SPEED LIMIT				
		N	DE ANZA BLVD								
PREPARER'S NAME		DISPATCH NOTIFIED			REVIEWER'S NAME			DATE REVIEWED			
Garcia, Daniel 2014		<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A			Torres, Christopher 1680			4/15/2015			

SANTA CLARA CO. SHERIFF'S
OFFICE CONFIDENTIAL RECORD
 FOR OFFICIAL USE ONLY
 RELEASED TO *Shrudhar Iyer*
 DATE *4/15/15* BY *A 24/16*



TRAFFIC COLLISION CODING

DATE OF COLLISION (MO. DAY YEAR) 4/9/2015	TIME 1450	NCIC # 4300	OFFICER I.D. 2014	NUMBER 15-099-0252C
PROPERTY DAMAGE		OWNER'S NAME	OWNER'S ADDRESS	NOTIFIED <input type="checkbox"/> YES <input type="checkbox"/> NO
DESCRIPTION OF DAMAGE				

<p>SEATING POSITION</p> <p>1 - DRIVER 2 TO 6 PASSENGERS 7 - STN. WAGON REAR 8 - RR. OCC. TRK OR VAN 9 - POSITION UNKNOWN 0 - OTHER</p>	<p>OCCUPANTS</p> <p>A - NONE IN VEHICLE B - UNKNOWN C - LAP BELT USED D - LAP BELT NOT USED E - SHOULDER HARNESS USED F - SHOULDER HARNESS NOT USED G - LAP / SHOULDER HARNESS USED H - LAP / SHOULDER HARNESS NOT USED J - PASSIVE RESTRAINT USED K - PASSIVE RESTRAINT NOT USED</p>	<p>SAFETY EQUIPMENT</p> <p>L - AIR BAG DEPLOYED M - AIR BAG NOT DEPLOYED N - OTHER P - NOT REQUIRED CHILD RESTRAINT Q - IN VEHICLE USED R - IN VEHICLE NOT USED S - IN VEHICLE USE UNKNOWN T - IN VEHICLE IMPROPER USE U - NONE IN VEHICLE</p>	<p>M / C BICYCLE - HELMET</p> <p>DRIVER PASSENGER V- NO X- NO W- YES Y- YES</p> <p>EJECTED FROM VEHICLE</p> <p>0 - NOT EJECTED 1 - FULLY EJECTED 2 - PARTIALLY EJECTED 3 - UNKNOWN</p>	<p>INATTENTION CODES</p> <p>A - CELL PHONE HANDHELD B - CELL PHONE HANDSFREE C - ELECTRONIC EQUIPMENT D - RADIO / CD E - SMOKING F - EATING G - CHILDREN H - ANIMALS I - PERSONAL HYGIENE J - READING K - OTHER</p>
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ITEMS MARKED BELOW WHICH ARE FOLLOWED BY AN ASTERISK (*) SHOULD BE EXPLAINED IN THE NARRATIVE

PRIMARY COLLISION FACTOR LIST NUMBER OF PARTY AT FAULT	TRAFFIC CONTROL DEVICES	1			2			3			SPECIAL INFORMATION	1			2			3			MOVEMENT PRECEDING COLLISION
		1	2	3	1	2	3	1	2	3		1	2	3	1	2	3				
1 A VC SECTION VIOLATED Cited No 22106	A CONTROLS FUNCTIONING										A HAZARDOUS MATERIAL							A STOPPED			
B OTHER IMPROPER DRIVING:	B CONTROLS NOT FUNCTIONING										B CELL PHONE HANDHELD IN USE							B PROCEEDING STRAIGHT			
C OTHER THAN DRIVER	C CONTROLS OBSCURED										C CELL PHONE HANDSFREE IN USE							C RAN OFF ROAD			
D UNKNOWN	D NO CONTROLS PRESENT/FACTOR										D CELL PHONE NOT IN USE							D MAKING RIGHT TURN			
	TYPE OF COLLISION									E SCHOOL BUS RELATED							E MAKING LEFT TURN				
	A HEAD-ON										F 75 FT MOTORTRUCK COMBO							F MAKING U TURN			
	B SIDESWIPE										G 32 FT TRAILER COMBO							G BACKING			
	C REAR END										H							H SLOWING / STOPPING			
	D BROADSIDE										I							I PASSING OTHER VEHICLE			
	E HIT OBJECT										J							J CHANGING LANES			
	F OVERTURNED										K							K PARKING MANUEVER			
	G VEHICLE PEDESTRIAN										L							L ENTERING TRAFFIC			
	H OTHER:										M							M OTHER UNSAFE TURNING			
	MOTOR VEHICLE INVOLVED WITH										N							N XING INTO OPPOSING LANE			
	A NON-COLLISION										O							O PARKED			
	B PEDESTRIAN		1	2	3							OTHER ASSOCIATED FACTOR (MARK 1 TO 2 ITEMS)						P MERGING			
	C OTHER MOTOR VEHICLE											A VC SECTION VIOLATION: Cited							Q TRAVELING WRONG WAY		
	D MOTOR VEH ON OTHER ROADWAY											B VC SECTION VIOLATION: Cited							R OTHER:*		
	E PARKED MOTOR VEHICLE											C VC SECTION VIOLATION: Cited									
	F TRAIN																				
	G BICYCLE																				
	H ANIMAL:																				
	I FIXED OBJECT:																				
	J OTHER OBJECT:																				
	PEDESTRIAN'S ACTION									I PREVIOUS COLLISION											
	A NO PEDESTRIAN INVOLVED											J UNFAMILIAR WITH ROAD							F IMPAIRMENT - PHYSICAL*		
	B CROSSING IN CROSSWALK AT INTERSECTION											K DEFECTIVE VEH. EQUIP.: Cited							G IMPAIRMENT NOT KNOWN		
	C CROSSING IN CROSSWALK NOT AT INTERSECTION																	H NOT APPLICABLE			
	D CROSSING - NOT IN CROSSWALK																	I SLEEPY / FATIGUED			
	E IN ROAD - INCLUDES SHOULDER											L UNINVOLVED VEHICLE									
	F NOT IN ROAD											M OTHER:*									
	G APPROACH/LEAVING SCHOOL BUS											N NONE APPARENT									
												O RUNAWAY VEHICLE CO. SHERIFF'S									

See Attached Sketch
See Attached Factual Diagram

MISCELLANEOUS OFFICE CONFIDENTIAL RECORD
FOR OFFICIAL USE ONLY

RELEASED TO *Shredder Syer*

DATE *5.4.15* R# *A7446*

INJURED / WITNESSES / PASSENGERS

DATE OF COLLISION 4/9/2015		TIME 1450	NCIC NUMBER 4300	OFFICER ID 2014	NUMBER 15-099-0252C												
WITNESS ONLY	PASSENGER ONLY	AGE	SEX	EXTENT OF INJURY ("X" ONE)				INJURED WAS ("X" ONE)				PARTY NUMBER	SEAT POS.	AIR BAG	SAFETY EQUIP.	EJECTED	
				FATAL INJURY	SEVERE INJURY	OTHER VISIBLE INJ	COMPLAINT OF PAIN	DRIVER	PASS.	PED.	BICYCLIST	OTHER					
<input type="checkbox"/> #	<input type="checkbox"/>	75	M	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2				
NAME / D.O.B. / ADDRESS GOPALAKRISHNAN N IYER [REDACTED]													TELEPHONE				
(INJURED ONLY) TRANSPORTED BY: EMS, 976 Lenzen Avenue, Suite 1200, San Jose, CA 95126								TAKEN TO: Santa Clara Valley Medical Center 751 South Bascom Ave. San Jose, CA 95128 (408) 885-5000									
DESCRIBE INJURIES broken left arm, avulsion to right hand																	
<input type="checkbox"/> VICTIM OF VIOLENT CRIME NOTIFIED																	
<input type="checkbox"/> #	<input type="checkbox"/>	68	F	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3				
NAME / D.O.B. / ADDRESS SARASWATHI G IYER [REDACTED]													TELEPHONE				
(INJURED ONLY) TRANSPORTED BY: EMS, 976 Lenzen Avenue, Suite 1200, San Jose, CA 95126								TAKEN TO: Santa Clara Valley Medical Center 751 South Bascom Ave. San Jose, CA 95128 (408) 885-5000									
DESCRIBE INJURIES broken right leg																	
<input type="checkbox"/> VICTIM OF VIOLENT CRIME NOTIFIED																	
<input checked="" type="checkbox"/> #	1	<input type="checkbox"/>	62	F	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
NAME / D.O.B. / ADDRESS [REDACTED] SANTA CLARA CO. SHERIFF'S													TELEPHONE				
(INJURED ONLY) TRANSPORTED BY:								TAKEN TO: OFFICE CONFIDENTIAL RECORD									
DESCRIBE INJURIES																	
<input type="checkbox"/> VICTIM OF VIOLENT CRIME NOTIFIED																	
<input checked="" type="checkbox"/> #	2	<input type="checkbox"/>	36	M	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NAME / D.O.B. / ADDRESS [REDACTED]													TELEPHONE				
(INJURED ONLY) TRANSPORTED BY:								TAKEN TO:									
DESCRIBE INJURIES																	
<input type="checkbox"/> VICTIM OF VIOLENT CRIME NOTIFIED																	
<input type="checkbox"/> #	<input type="checkbox"/>																
NAME / D.O.B. / ADDRESS													TELEPHONE				
(INJURED ONLY) TRANSPORTED BY:								TAKEN TO:									
DESCRIBE INJURIES																	
<input type="checkbox"/> VICTIM OF VIOLENT CRIME NOTIFIED																	
PREPARER'S NAME Garcia, Daniel			I.D. NUMBER 2014			MO. DAY YEAR 4/9/2015			REVIEWER'S NAME Torres, Christopher 1680			MO. DAY YEAR 4/15/2015					

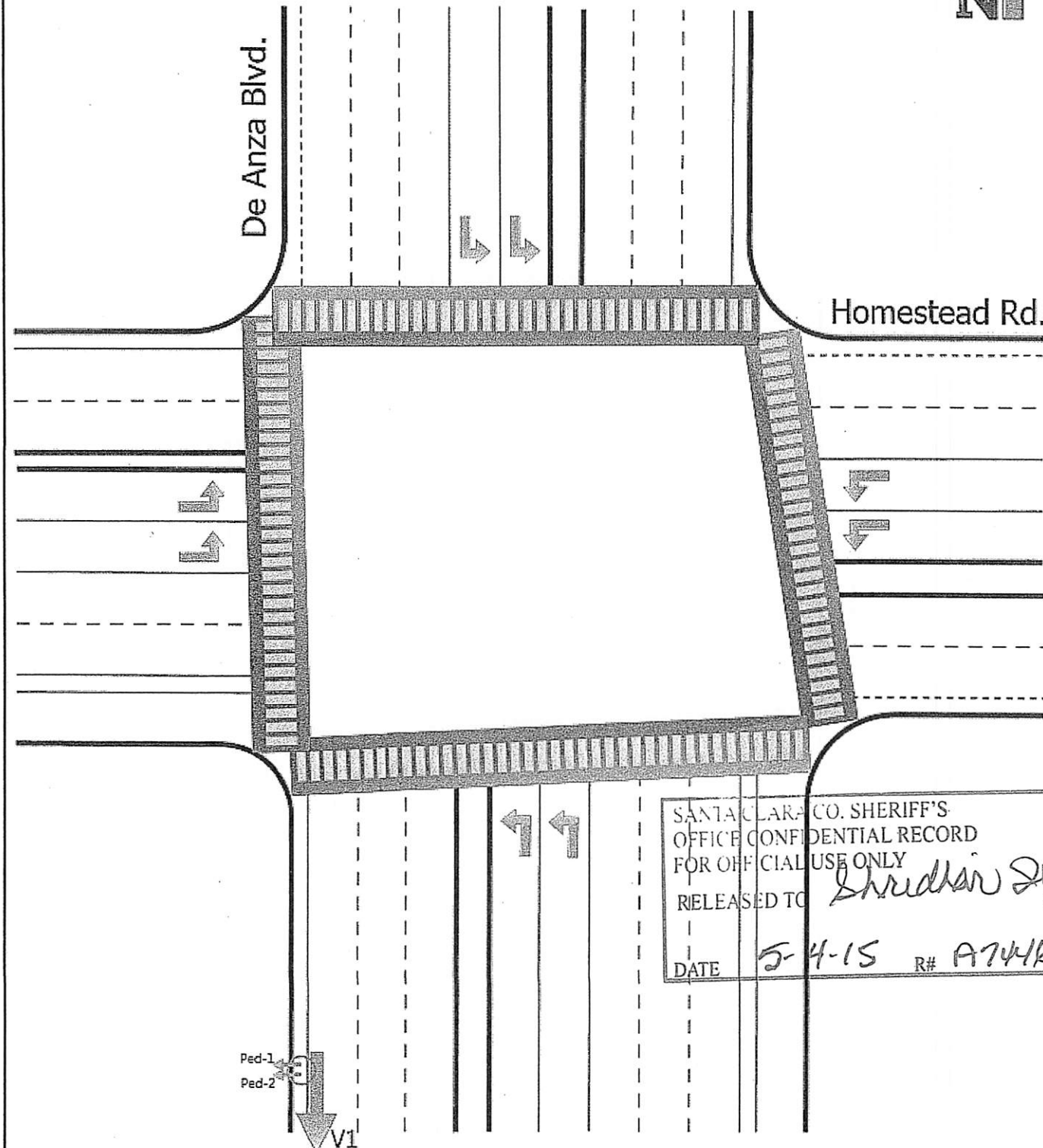
RA CO. SHERIFF'S
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5-4-15

State of California
Sketch Diagram

CHP 555

DATE OF INCIDENT 4/09/2015	TIME 1450	NCIC NUMBER 4300	OFFICER I.D. 2014	NUMBER 15-099-0252C
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ALL MEASUREMENTS ARE APPROXIMATE AND NOT TO SCALE UNLESS STATED (SCALE =)



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DATE *5-4-15* R# *A7446*

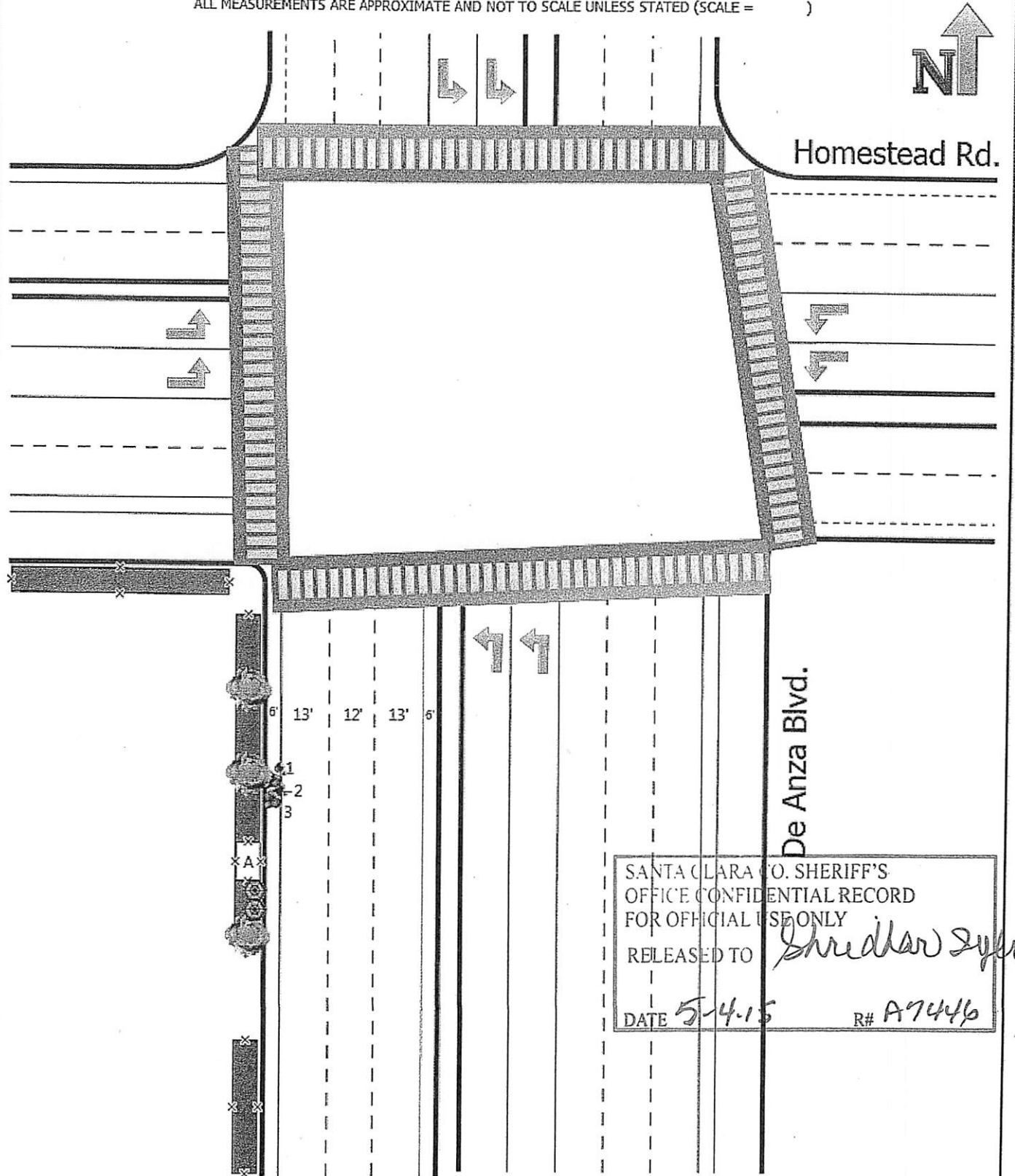
PREPARED BY D. Garcia	I.D. NUMBER 2014	DATE 4/09/2015	REVIEWER'S NAME C. Torres 1680	DATE 4/15/2015
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State of California
Sketch Diagram

CHP 555

DATE OF INCIDENT 4/09/2015	TIME 1450	NCIC NUMBER 4300	OFFICER I.D. 2014	NUMBER 15-099-0252C
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ALL MEASUREMENTS ARE APPROXIMATE AND NOT TO SCALE UNLESS STATED (SCALE =)



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RELEASED TO *Shredhar Syke*
DATE *5-4-15* R# *A7446*

PREPARED BY D. Garcia	I.D. NUMBER 2014	DATE 4/09/2015	REVIEWER'S NAME C. Torres 1680	DATE 4/15/2015
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Date of Incident/Occurrence 4/9/2015	Time(2400) 1450	NCIC NUMBER 4300	OFFICER ID # 2014	NUMBER 15-099-0252C
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1 **Facts:**

2

3 **Notification:**

4

5 On 4/9/15, at approximately 1450 hours, I responded to an injury collision involving a VTA bus on De Anza
6 Blvd, near the intersection of Homestead Road. I responded from De Anza Blvd and Prospect Road. I arrived at
7 approximately 1503 hours.

8

9 All times, measurements and speeds are approximate. Measurements were taken by rollmeter.

10

11 **Scene Description:**

12

13 At the scene of the collision, De Anza Blvd runs north/south. In the southbound direction, there are three lanes
14 of travel and a bicycle lane. The roadway surface is comprised mainly of asphalt, with the gutter and curb
15 comprised of concrete.

16

17 At the scene of the collision, trees lined the grassy area along the west sidewalk of De Anza Blvd. There is a bus
18 stop with a waiting bench. There was one light pole and one pole holding a sign for Interstate 280.

19

20 The intersection of De Anza Blvd and Homestead Road is controlled by traffic lights in all directions, which
21 were operating correctly at the time of the collision.

22

23 **Parties:**

24

25 **Pedestrian-1 – Gopalakrishnan Iyer:**

26

27 I made contact with Pedestrian-1 in the Santa Clara County EMS Medic 24 ambulance at the scene. Pedestrian-1
28 was identified by his California Driver License. Pedestrian-1 was determined to be involved by his statement
29 and injuries.

30

31 **Pedestrian-2 – Saraswathi Iyer:**

32

33 I made contact with Pedestrian-2 in the Santa Clara County EMS Medic 26 ambulance at the scene. Pedestrian-2
34 was identified by her California Driver License. Pedestrian-2 was determined to be involved by her statement
35 and injuries.

36

37 **Driver-1 – Christine Hustedt:**

38

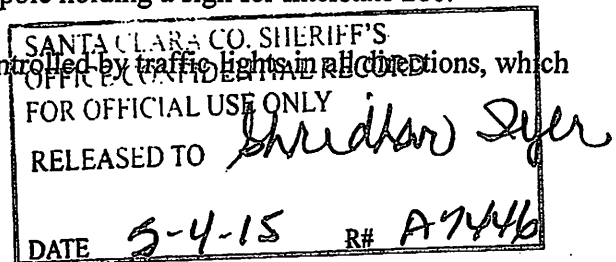
39 Driver-1 was located on Sunnyvale-Saratoga Road at Hollenbeck Avenue, inside Vehicle-1. Driver-1 was
40 identified by her California Driver License. Driver-1 was determined to be the driver of Vehicle-1 by her
41 statement.

42

43

44

45



PREPARER'S NAME AND I.D. NUMBER Garcia, Daniel 2014	DATE 04/15/2015	REVIEWER'S NAME Torres, Christopher 1680	DATE 04/15/2015
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Date of Incident/Occurrence 4/9/2015	Time(2400) 1450	NCIC NUMBER 4300	OFFICER ID # 2014	NUMBER 15-099-0252C
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46 **Physical Evidence:**

47

48 There were two separate pools of blood in the gutter at the scene of the collision. These pools of blood were
49 cleaned by Santa Clara County Fire personnel at the conclusion of the incident.

51 **Statements:**

52

53 **Statement of Pedestrian-1:**

54

55 Pedestrian-1 was a passenger in Vehicle-1 as it came to a stop at the bus stop on southbound De Anza Blvd, just
56 south of Homestead Road. Pedestrian-1 was preparing to exit the rear doors of Vehicle-1 at this stop, along with
57 Pedestrian-2. When Vehicle-1 came to a stop, Pedestrian-1 and Pedestrian-2 made their way to the rear doors to
58 de-board. Pedestrian-1 went down the steps at the rear door and exited onto the curb. Pedestrian-1 turned
59 around to assist Pedestrian-2 off the bus because she was very slow and has difficulty with steps. Pedestrian-1
60 was holding Pedestrian-2's hand as she made her way down the steps. As Pedestrian-2 was making her way
61 down the steps, the rear doors of Vehicle-1 began closing onto Pedestrian-2's body. Pedestrian-2 squeezed
62 through the doors, but fell down onto the curb, causing Pedestrian-1 to fall down as well. Pedestrian-1 and
63 Pedestrian-2 were lying partially in the roadway; they were both trying to get up after falling. Suddenly,
64 Vehicle-1 drove forward, running over Pedestrian-1 and Pedestrian-2.

65

66 **Statement of Pedestrian-2:**

67

68 Pedestrian-2 was a passenger in Vehicle-1 as it came to a stop at the bus stop on southbound De Anza Blvd, just
69 south of Homestead Road. Pedestrian-2 was preparing to exit the rear doors of Vehicle-1 at this stop, along with
70 Pedestrian-1. When Vehicle-1 came to a stop, Pedestrian-1 and Pedestrian-2 made their way to the rear doors to
71 de-board. Pedestrian-1 went down the steps at the rear door and exited onto the curb. Pedestrian-1 turned
72 around to assist Pedestrian-2 off the bus. Pedestrian-1 was holding Pedestrian-2's hand as she made her way
73 down the steps. As Pedestrian-2 was making her way down the steps, the rear doors of Vehicle-1 began closing
74 onto Pedestrian-2's body. Pedestrian-2 squeezed through the doors, but fell down onto the curb, causing
75 Pedestrian-1 to fall down as well. Pedestrian-1 and Pedestrian-2 were lying partially in the roadway; they were
76 both trying to get up after falling. Suddenly, Vehicle-1 drove forward, running over Pedestrian-1 and
77 Pedestrian-2.

78

79 **Statement of Driver-1:**

80

81 Driver-1's statement was obtained by Deputy Galazzo. See Deputy Galazzo's Supplemental Report for details.

82

83 **Statement of Witness-1:**

84

85 Witness-1's statement was obtained by Deputy Pickett. See Deputy Pickett's Supplemental Report for details.

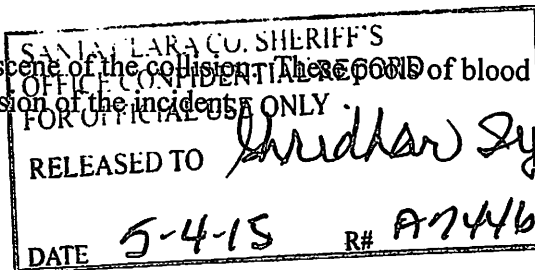
86

87 **Statement of Witness-2:**

88

89 Witness-2's statement was obtained by Deputy Pickett. See Deputy Pickett's Supplemental Report for details.

90



PREPARER'S NAME AND I.D. NUMBER Garcia, Daniel 2014	DATE 04/15/2015	REVIEWER'S NAME Torres, Christopher 1680	DATE 04/15/2015
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Date of Incident/Occurrence 4/9/2015	Time(2400) 1450	NCIC NUMBER 4300	OFFICER ID # 2014	NUMBER 15-099-0252C
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91 **Factual Diagram Legend:**

- 92
- 93 1 - Pool of blood: 100' south of the south curbline extension of Homestead Road and 1' east of the west
 94 curbline of De Anza Blvd.
- 95 2 - FedEx envelope on ground in gutter: 102' south of the south curbline extension of Homestead Road and
 96 1' east of the west curbline of De Anza Blvd.
- 97 3 - Pool of blood: 104' south of the south curbline extension of Homestead Road and 1' east of the west
 98 curbline of De Anza Blvd.
- 99 A - Bus stop bench: 133' south of the south curbline extension of Homestead Road and 4' west of the west
 100 curbline of De Anza Blvd.

SANTA CLARA CO. SHERIFF'S
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 DATE *5-4-15* R# *A744b*

103 **Opinions and Conclusions:**

105 **Summary:**

107 Driver-1 was driving Vehicle-1 southbound on De Anza Blvd, just south of Homestead Road, in the far right
 108 lane, preparing to stop at the bus stop to pick up passengers waiting at the bus stop and drop off passengers who
 109 requested a stop. Driver-1 came to a stop and opened both the front and rear passenger doors. Driver-1 saw a
 110 passenger exit the rear doors of the bus and thought there were no other passengers exiting. Driver-1 did not see
 111 Pedestrian-1 and Pedestrian-2 trying to exit the rear doors. Driver-1 closed the rear doors and began to drive
 112 forward slightly. Driver-1 was alerted by passengers that other passengers wanted to exit. Driver-1 stopped
 113 immediately, opened the rear doors, and saw Witness-1 exit the bus. Once Witness-1 exited the bus, Driver-1
 114 closed the rear doors and drove away on her route. Driver-1 did not notice Pedestrian-1 and Pedestrian-2 had
 115 fallen in front of the rear wheels of Vehicle-1 prior to her driving away. Driver-1 did not feel any bumps or
 116 anything unusual as she drove away from the bus stop. Driver-1 continued on her route southbound on De Anza
 117 Blvd, turned westbound on Stevens Creek Blvd, turned northbound onto Stelling Road, and was contacted by
 118 deputies on Hollenbeck Ave, just north of Homestead Road.

120 **Area of Impact:**

- 122 AOI-1 was approximately 100' south of the south curbline extension of Homestead Road and 1' east of the west
 123 curbline of De Anza Blvd.
- 125 AOI-2 was approximately 104' south of the south curbline extension of Homestead Road and 1' east of the west
 126 curbline of De Anza Blvd.

128 **Cause:**

130 Driver-1 did not check to make sure there were no hazards before driving away from the bus stop, a violation of
 131 CVC 22106 – Unsafe Start.

133 **Recommendations:**

134
 135 None.

PREPARER'S NAME AND I.D. NUMBER Garcia, Daniel 2014	DATE 04/15/2015	REVIEWER'S NAME Torres, Christopher 1680	DATE 04/15/2015
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