

☒ USDOT Number   ☐ MC/MX Number   ☐ Name  
 Enter Value:

## Company Snapshot

**VL TRUCKING INC**  
USDOT Number: 1961591

### ID/Operations | [Inspections/Crashes In US](#) | [Inspections/Crashes In Canada](#) | [Safety Rating](#)

**Carriers:** If you would like to update the following ID/Operations information, please complete and submit form [MCS-150](#) which can be obtained [online](#) or from your State FMCSA office. If you would like to challenge the accuracy of your company's safety data, you can do so using FMCSA's [DataQs](#) system.

#### Other Information for this Carrier

- ▼ [SMS Results](#)
- ▼ [Licensing & Insurance](#)

**Carrier and other users:** FMCSA provides the Company Safety Profile (CSP) to motor carriers and the general public interested in obtaining greater detail on a particular motor carrier's safety performance than what is captured in the Company Snapshot. To obtain a CSP please visit the [CSP order page](#) or call (800)832-5660 or (703)280-4001 (Fee Required).

For help on the explanation of individual data fields, click on any field name or for help of a general nature go to [SAFER General Help](#).

The information below reflects the content of the FMCSA management information systems as of **01/08/2024**.

To find out if this entity has a pending insurance cancellation, please [click here](#).

<b>Entity Type:</b>	CARRIER																																
<b>Operating Status:</b>	NOT AUTHORIZED	<b>Out of Service Date:</b>	None																														
<b>Legal Name:</b>	VL TRUCKING INC																																
<b>DBA Name:</b>																																	
<b>Physical Address:</b>	222 THIRD AVE SE SUITE 501 CEDAR RAPIDS, IA 52401																																
<b>Phone:</b>	(847) 635-3003																																
<b>Mailing Address:</b>	222 THIRD AVE SE SUITE 501 CEDAR RAPIDS, IA 52401																																
<b>USDOT Number:</b>	1961591	<b>State Carrier ID Number:</b>																															
<b>MC/MX/FF Number(s):</b>	MC-776884	<b>DUNS Number:</b>	--																														
<b>Power Units:</b>	1	<b>Drivers:</b>	1																														
<b>MCS-150 Form Date:</b>	03/17/2023	<b>MCS-150 Mileage (Year):</b>	23,761,528 (2022)																														
<b>Operation Classification:</b>																																	
<table border="0"> <tr> <td><input checked="" type="checkbox"/> Auth. For Hire</td> <td>Priv. Pass. (Non-business)</td> <td>State Gov't</td> </tr> <tr> <td><input type="checkbox"/> Exempt For Hire</td> <td>Migrant</td> <td>Local Gov't</td> </tr> <tr> <td><input type="checkbox"/> Private(Property)</td> <td>U.S. Mail</td> <td>Indian Nation</td> </tr> <tr> <td><input type="checkbox"/> Priv. Pass. (Business)</td> <td>Fed. Gov't</td> <td></td> </tr> </table>				<input checked="" type="checkbox"/> Auth. For Hire	Priv. Pass. (Non-business)	State Gov't	<input type="checkbox"/> Exempt For Hire	Migrant	Local Gov't	<input type="checkbox"/> Private(Property)	U.S. Mail	Indian Nation	<input type="checkbox"/> Priv. Pass. (Business)	Fed. Gov't																			
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<b>Carrier Operation:</b>																																	
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<b>Cargo Carried:</b>																																	
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1

SAFETY PERFORMANCE HISTORY  
RECORDS REQUEST

- CONFIDENTIAL -

**Company:** VL TRUCKING INC (USDOT 1961591)**Phone:** (847) 635-3003**Date:** 12/01/23**Address:** 222 THIRD AVE SE SUITE 501 CEDAR RAPIDS, IA 52401**Fax:**

I hereby authorize this company to release all records of employment, including assessments of my job previous ability, and fitness( including dates of any and all alcohol or drug tests, those confirmed results, and/or my refusing to any alcohol or drug tests and any rehabilitation completion under direction of SAP/MRO) to each and every company( their authorized agents) which may request such information in connection with my application for employment company, I hereby release this company, and its employees, officers, directors, and agents from any and all liable type as a result of providing the following information to the below mentioned person and/or company.

  
Chase Ryan Owens (Dec 1, 2023 16:04 CST)  
Safety Manager (Dec 8, 2023 15:48 CST)

Applicant's Signature

Company representative

**Dear Personnel Manager**

The person named herein has applied to this company for employment in a safety-sensitive position, Your finding the applicant as a past employer. Will you kindly reply to this inquiry respecting this applicant. As you will read waiver stated above, all liability of you and your company has been released by the applicant.

**PLEASE BE ADVISED!** You may reply by FAX +1 630 485 6980 or e-mail: [safety@royal3inc.com](mailto:safety@royal3inc.com).

**Name of Applicant:** Chase Ryan Owens**SSN:** 644106976**Job Applying For:** OTR Driver

Did the Applicant work for you as a driver: Yes No

If No, please explain: \_\_\_\_\_

If employed as a driver, please answer the following: Start Date : \_\_\_\_\_ End Date : \_\_\_\_\_

☐ Company Driver ☐ Owner/Operator ☐ Other? \_\_\_\_\_

Type of tractor operated: \_\_\_\_\_ Type of trailer pulled: \_\_\_\_\_

Other equipment operated: \_\_\_\_\_ Commodities operated: \_\_\_\_\_

Accidents: ☐ Yes ☐ No If yes, please give the date and brief description of each accident: \_\_\_\_\_Traffic Violations: ☐ Yes ☐ No If yes, please list all including the date and type of violation: \_\_\_\_\_**INQUIRY FOR ALCOHOL AND CONTROLLED SUBSTANCES INFORMATION**Alcohol tests with a result of 0.04 or greater? ☐ Yes ☐ No If yes, please give date: \_\_\_\_\_Verified positive controlled substances test results? ☐ Yes ☐ No If yes, please give date: \_\_\_\_\_Refusals to be tested? ☐ Yes ☐ No If yes, please give date: \_\_\_\_\_Rehab completed under direction of SAP/MRO? ☐ Yes ☐ No If yes, please give date: \_\_\_\_\_

Any problems with bonding? Yes No If yes, please explain: \_\_\_\_\_

Why did this employee leave your company? \_\_\_\_\_

Would you re-employee this person? ☐ Yes ☐ No If no, please explain: \_\_\_\_\_

Additional comments: ( Any problems with customer relations, supervision, or abuse of equipment? \_\_\_\_\_

Name/Title (of person providing the above information): \_\_\_\_\_

Company: \_\_\_\_\_

Date: \_\_\_\_\_

**Zigi Freight Inc. dba Royal 3, Inc.**  
**6850 W. 63<sup>rd</sup> St.**  
**Chicago, IL 60638**

**December 30, 2023**

RE: Employee Verification Requests for Chase Ryan Owens from Trust Line Inc.

To whom it may concern:

As of December 1, 2023 I have made the following attempts to contact Trust Line Inc in order to verify Chase Ryan Owens's employment there.

The first attempt was made on December 12, 2023 when I sent a request at [TRUSTLINEDISPATCH@gmail.com](mailto:TRUSTLINEDISPATCH@gmail.com) which was recommended by safety person when I reached out through phone to their office.

On December 19, 2023 I re-sent request completing the second attempt and on December 27, 2023 I have made a third and final attempt. A formal response from Trust Line Inc was never received.

Sincerely,

Diana Baranda

A handwritten signature in black ink, appearing to be 'Diana', with a stylized flourish at the end.



Employment Verifications <ev@royal3inc.com>

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## Employment Verification for Chase Ryan Owens

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**Employment Verifications** <ev@royal3inc.com>

Wed, Dec 27, 2023 at 10:18 PM

To: TRUSTLINEDISPATCH@gmail.com

Hello,

I am a safety officer from Royal3 INC company.

I am sending you this email to confirm Chase Ryan Owens's employment with your company.

Please find the attached form, and send it back to me at your earliest convenience.

Thank you!

Kind regards,

Sofia

**HR Department**

**Zigi Freight dba Royal 3 Inc.**

6850 W. 63rd St.

Chicago, IL 60638

p. 630-566-2119

f. 630-485-6980

e. [ev@royal3inc.com](mailto:ev@royal3inc.com)



**EV ChaseRyanOwens-4.pdf**

208K



Employment Verifications <ev@royal3inc.com>

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## Employment Verification for Chase Ryan Owens

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**Employment Verifications** <ev@royal3inc.com>  
To: TRUSTLINEDISPATCH@gmail.com

Tue, Dec 19, 2023 at 1:04 PM

Hello,

I am a safety officer from Royal3 INC company.  
I am sending you this email to confirm Chase Ryan Owens's employment with your company.  
Please find the attached form, and send it back to me at your earliest convenience.  
Thank you!

Kind regards,  
Sofia  
**HR Department**  
**Zigi Freight dba Royal 3 Inc.**  
6850 W. 63rd St.  
Chicago, IL 60638  
p. 630-566-2119  
f. 630-485-6980  
e. [ev@royal3inc.com](mailto:ev@royal3inc.com)

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 **EV ChaseRyanOwens-4.pdf**  
208K



Employment Verifications <ev@royal3inc.com>

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## Employment Verification for Chase Ryan Owens

1 message

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**Employment Verifications** <ev@royal3inc.com>  
To: TRUSTLINEDISPATCH@gmail.com

Tue, Dec 12, 2023 at 1:28 PM

Hello,

I am a safety officer from Royal3 INC company.  
I am sending you this email to confirm Chase Ryan Owens's employment with your company.  
Please find the attached form, and send it back to me at your earliest convenience.  
Thank you!

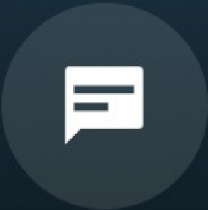
Kind regards,  
Sofia  
**HR Department**  
**Zigi Freight dba Royal 3 Inc.**  
6850 W. 63rd St.  
Chicago, IL 60638  
p. 630-566-2119  
f. 630-485-6980  
e. [ev@royal3inc.com](mailto:ev@royal3inc.com)

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 **EV ChaseRyanOwens-4.pdf**  
208K



(718) 775-0505



12.27.23.

Outgoing call

14:07 (50 sec)

From

(630) 566-2119 (me)

(718) 775-0505

Phone number



Create new contact



Add to existing contact

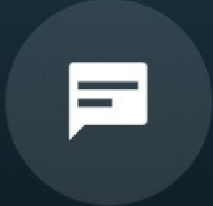


Block and report





(718) 775-0505



12.19.23.

Outgoing call

10:44 (51 sec)

From

(630) 566-2119 (me)

(718) 775-0505

Phone number



Create new contact



Add to existing contact



Block and report







(718) 775-0505



12.12.23.

Outgoing call

13:49 (41 sec)

From

(630) 566-2119 (me)

(718) 775-0505

Phone number



Create new contact



Add to existing contact



Block and report






2

SAFETY PERFORMANCE HISTORY  
RECORDS REQUEST

- CONFIDENTIAL -

**Company:** TRUST LINE INC (USDOT 3488528)  
**Address:** 2 KUHARS WAY NEWTOWN, PA 18940**Phone:** (718) 775-0505  
**Fax:****Date:** 12/01/23

I hereby authorize this company to release all records of employment, including assessments of my job previous ability, and fitness( including dates of any and all alcohol or drug tests, those confirmed results, and/or my refusing to any alcohol or drug tests and any rehabilitation completion under direction of SAP/MRO) to each and every company( their authorized agents) which may request such information in connection with my application for employment company, I hereby release this company, and its employees, officers, directors, and agents from any and all liable type as a result of providing the following information to the below mentioned person and/or company.

  
Chase Ryan Owens (Dec 1, 2023 16:04 CST)  
Safety Manager (Dec 8, 2023 15:48 CST)

Applicant's Signature

Company representative

**Dear Personnel Manager**

The person named herein has applied to this company for employment in a safety-sensitive position, Your finding the applicant as a past employer. Will you kindly reply to this inquiry respecting this applicant. As you will read waiver stated above, all liability of you and your company has been released by the applicant.

**PLEASE BE ADVISED!** You may reply by FAX +1 630 485 6980 or e-mail: [safety@royal3inc.com](mailto:safety@royal3inc.com).

Name of Applicant: Chase Ryan Owens SSN: 644106976 Job Applying For: OTR Driver

Did the Applicant work for you as a driver: Yes No

If No, please explain: \_\_\_\_\_

If employed as a driver, please answer the following: Start Date : \_\_\_\_\_ End Date : \_\_\_\_\_

☐ Company Driver ☐ Owner/Operator ☐ Other? \_\_\_\_\_

Type of tractor operated: \_\_\_\_\_ Type of trailer pulled: \_\_\_\_\_

Other equipment operated: \_\_\_\_\_ Commodities operated: \_\_\_\_\_

Accidents: ☐ Yes ☐ No If yes, please give the date and brief description of each accident: \_\_\_\_\_Traffic Violations: ☐ Yes ☐ No If yes, please list all including the date and type of violation: \_\_\_\_\_**INQUIRY FOR ALCOHOL AND CONTROLLED SUBSTANCES INFORMATION**Alcohol tests with a result of 0.04 or greater? ☐ Yes ☐ No If yes, please give date: \_\_\_\_\_Verified positive controlled substances test results? ☐ Yes ☐ No If yes, please give date: \_\_\_\_\_Refusals to be tested? ☐ Yes ☐ No If yes, please give date: \_\_\_\_\_Rehab completed under direction of SAP/MRO? ☐ Yes ☐ No If yes, please give date: \_\_\_\_\_

Any problems with bonding? Yes No If yes, please explain: \_\_\_\_\_

Why did this employee leave your company? \_\_\_\_\_

Would you re-employee this person? ☐ Yes ☐ No If no, please explain: \_\_\_\_\_

Additional comments: ( Any problems with customer relations, supervision, or abuse of equipment? \_\_\_\_\_

Name/Title (of person providing the above information): \_\_\_\_\_

Company: \_\_\_\_\_

Date: \_\_\_\_\_

**Zigi Freight Inc. dba Royal 3, Inc.**  
**6850 W. 63<sup>rd</sup> St.**  
**Chicago, IL 60638**

**December 30, 2023**

RE: Employee Verification Requests for Chase Ryan Owens from Nova Terra Solutions Llc.

To whom it may concern:

As of December 1, 2023 I have made the following attempts to contact Nova Terra Solutions Llc in order to verify Chase Ryan Owens's employment there.

The first attempt was made on December 12, 2023 when I sent a request at [TRANSPORTATION@novaterrasolutions.com](mailto:TRANSPORTATION@novaterrasolutions.com) which was recommended by safety person when I reached out through phone to their office.

On December 19, 2023 I re-sent request completing the second attempt and on December 27, 2023 I have made a third and final attempt. A formal response from Nova Terra Solutions Llc was never received.

Sincerely,

Diana Baranda

A handwritten signature in black ink, appearing to be 'Diana', with a stylized flourish at the end.



Employment Verifications <ev@royal3inc.com>

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## Employment Verification for Chase Ryan Owens

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**Employment Verifications** <ev@royal3inc.com>  
To: TRANSPORTATION@novaterrasolutions.com

Wed, Dec 27, 2023 at 10:18 PM

Hello,

I am a safety officer from Royal3 INC company.  
I am sending you this email to confirm Chase Ryan Owens's employment with your company.  
Please find the attached form, and send it back to me at your earliest convenience.  
Thank you!

Kind regards,  
Sofia  
**HR Department**  
**Zigi Freight dba Royal 3 Inc.**  
6850 W. 63rd St.  
Chicago, IL 60638  
p. 630-566-2119  
f. 630-485-6980  
e. [ev@royal3inc.com](mailto:ev@royal3inc.com)

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 **EV ChaseRyanOwens-5.pdf**  
208K



Employment Verifications <ev@royal3inc.com>

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## Employment Verification for Chase Ryan Owens

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**Employment Verifications** <ev@royal3inc.com>  
To: TRANSPORTATION@novaterrasolutions.com

Tue, Dec 19, 2023 at 1:04 PM

Hello,

I am a safety officer from Royal3 INC company.  
I am sending you this email to confirm Chase Ryan Owens's employment with your company.  
Please find the attached form, and send it back to me at your earliest convenience.  
Thank you!

Kind regards,  
Sofia  
**HR Department**  
**Zigi Freight dba Royal 3 Inc.**  
6850 W. 63rd St.  
Chicago, IL 60638  
p. 630-566-2119  
f. 630-485-6980  
e. [ev@royal3inc.com](mailto:ev@royal3inc.com)



**EV ChaseRyanOwens-5.pdf**  
208K



Employment Verifications <ev@royal3inc.com>

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## Employment Verification for Chase Ryan Owens

1 message

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**Employment Verifications** <ev@royal3inc.com>  
To: TRANSPORTATION@novaterrasolutions.com

Tue, Dec 12, 2023 at 1:31 PM

Hello,

I am a safety officer from Royal3 INC company.  
I am sending you this email to confirm Chase Ryan Owens's employment with your company.  
Please find the attached form, and send it back to me at your earliest convenience.  
Thank you!

Kind regards,  
Sofia  
**HR Department**  
**Zigi Freight dba Royal 3 Inc.**  
6850 W. 63rd St.  
Chicago, IL 60638  
p. 630-566-2119  
f. 630-485-6980  
e. [ev@royal3inc.com](mailto:ev@royal3inc.com)

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 **EV ChaseRyanOwens-5.pdf**  
208K



(785) 256-0876



12.27.23.

Outgoing call

14:11 (52 sec)

From

(630) 566-2119 (me)

(785) 256-0876

Phone number



Create new contact



Add to existing contact



Block and report





(785) 256-0876



12.19.23.

Outgoing call

10:56 (48 sec)

From

(630) 566-2119 (me)

(785) 256-0876

Phone number



Create new contact



Add to existing contact



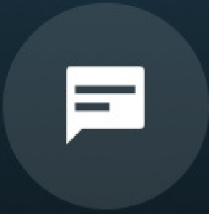
Block and report







(785) 256-0876



12.12.23.

Outgoing call

13:54 (45 sec)

From

(630) 566-2119 (me)

(785) 256-0876

Phone number



Create new contact



Add to existing contact



Block and report





3

SAFETY PERFORMANCE HISTORY  
RECORDS REQUEST

- CONFIDENTIAL -

**Company:** NOVA TERRA SOLUTIONS LLC (USDOT 3527933) **Phone:** (785) 256-0876**Date:** 12/01/23**Address:** 1510 SW LANE ST APT 29C TOPEKA, KS 66604 **Fax:**

I hereby authorize this company to release all records of employment, including assessments of my job previous ability, and fitness( including dates of any and all alcohol or drug tests, those confirmed results, and/or my refusing to any alcohol or drug tests and any rehabilitation completion under direction of SAP/MRO) to each and every company( their authorized agents) which may request such information in connection with my application for employment company, I hereby release this company, and its employees, officers, directors, and agents from any and all liable type as a result of providing the following information to the below mentioned person and/or company.

  
Chase Ryan Owens (Dec 1, 2023 16:04 CST)  
Safety Manager (Dec 8, 2023 15:48 CST)

Applicant's Signature

Company representative

**Dear Personnel Manager**

**The person named herein has applied to this company for employment in a safety-sensitive position, Your finding the applicant as a past employer. Will you kindly reply to this inquiry respecting this applicant. As you will read waiver stated above, all liability of you and your company has been released by the applicant.**

**PLEASE BE ADVISED! You may reply by FAX +1 630 485 6980 or e-mail: [safety@royal3inc.com](mailto:safety@royal3inc.com).**

**Name of Applicant:** Chase Ryan Owens **SSN:** 644106976 **Job Applying For:** OTR Driver

Did the Applicant work for you as a driver: Yes No

If No, please explain: \_\_\_\_\_

If employed as a driver, please answer the following: Start Date : \_\_\_\_\_ End Date : \_\_\_\_\_

☐ Company Driver ☐ Owner/Operator ☐ Other? \_\_\_\_\_

Type of tractor operated: \_\_\_\_\_ Type of trailer pulled: \_\_\_\_\_

Other equipment operated: \_\_\_\_\_ Commodities operated: \_\_\_\_\_

Accidents: ☐ Yes ☐ No If yes, please give the date and brief description of each accident: \_\_\_\_\_

Traffic Violations: ☐ Yes ☐ No If yes, please list all including the date and type of violation: \_\_\_\_\_

**INQUIRY FOR ALCOHOL AND CONTROLLED SUBSTANCES INFORMATION**

Alcohol tests with a result of 0.04 or greater? ☐ Yes ☐ No If yes, please give date: \_\_\_\_\_

Verified positive controlled substances test results? ☐ Yes ☐ No If yes, please give date: \_\_\_\_\_

Refusals to be tested? ☐ Yes ☐ No If yes, please give date: \_\_\_\_\_

Rehab completed under direction of SAP/MRO? ☐ Yes ☐ No If yes, please give date: \_\_\_\_\_

Any problems with bonding? Yes No If yes, please explain: \_\_\_\_\_

Why did this employee leave your company? \_\_\_\_\_

Would you re-employee this person? ☐ Yes ☐ No If no, please explain: \_\_\_\_\_

Additional comments: ( Any problems with customer relations, supervision, or abuse of equipment? \_\_\_\_\_

Name/Title (of person providing the above information): \_\_\_\_\_

Company: \_\_\_\_\_

Date: \_\_\_\_\_



4

SAFETY PERFORMANCE HISTORY  
RECORDS REQUEST

- CONFIDENTIAL -

Company: SILVICOM INC

Phone: (708) 236-5732

Date: 12/01/23

Address: 1301 W ARMITAGE AVE MELROSE PARK, IL 60160 Fax:

I hereby authorize this company to release all records of employment, including assessments of my job previous ability, and fitness( including dates of any and all alcohol or drug tests, those confirmed results, and/or my refusing to any alcohol or drug tests and any rehabilitation completion under direction of SAP/MRO) to each and every company( their authorized agents) which may request such information in connection with my application for employment company, I hereby release this company, and its employees, officers, directors, and agents from any and all liable type as a result of providing the following information to the below mentioned person and/or company.

Chase Ryan Owens  
Chase Ryan Owens (Dec 1, 2023 16:04 CST)[Signature]  
Safety Manager (Dec 8, 2023 15:48 CST)

Applicant's Signature

Company representative

## Dear Personnel Manager

The person named herein has applied to this company for employment in a safety-sensitive position, Your finding the applicant as a past employer. Will you kindly reply to this inquiry respecting this applicant. As you will read waiver stated above, all liability of you and your company has been released by the applicant.

**PLEASE BE ADVISED!** You may reply by FAX +1 630 485 6980 or e-mail: [safety@royal3inc.com](mailto:safety@royal3inc.com).

Name of Applicant: Chase Ryan Owens SSN: 644106976

Job Applying For: OTR Driver

Did the Applicant work for you as a driver: ☒ Yes ☐ No

If No, please explain: \_\_\_\_\_

If employed as a driver, please answer the following: Start Date : 09/23 End Date : 11/23☒ Company Driver ☐ Owner/Operator ☐ Other? \_\_\_\_\_Type of tractor operated: Sevi Type of trailer pulled: VAN

Other equipment operated: \_\_\_\_\_ Commodities operated: \_\_\_\_\_

Accidents: ☐ Yes ☒ No If yes, please give the date and brief description of each accident: \_\_\_\_\_Traffic Violations: ☐ Yes ☒ No If yes, please list all including the date and type of violation: \_\_\_\_\_

## INQUIRY FOR ALCOHOL AND CONTROLLED SUBSTANCES INFORMATION

Alcohol tests with a result of 0.04 or greater? ☐ Yes ☒ No If yes, please give date: \_\_\_\_\_Verified positive controlled substances test results? ☐ Yes ☒ No If yes, please give date: \_\_\_\_\_Refusals to be tested? ☐ Yes ☒ No If yes, please give date: \_\_\_\_\_Rehab completed under direction of SAP/MRO? ☐ Yes ☒ No If yes, please give date: \_\_\_\_\_

Any problems with bonding? Yes No If yes, please explain: \_\_\_\_\_

Why did this employee leave your company? resignationWould you re-employee this person? ☐ Yes ☐ No If no, please explain: \_\_\_\_\_Upon Review  
Additional comments: ( Any problems with customer relations, supervision, or abuse of equipment? \_\_\_\_\_)N/A  
Name/Title (of person providing the above information): MARYCompany: Silvicom Inc.Date: 12.19.23





4

SAFETY PERFORMANCE HISTORY  
RECORDS REQUEST

- CONFIDENTIAL -

**Company:** SILVICOM INC**Phone:** (708) 236-5732**Date:** 12/01/23**Address:** 1301 W ARMITAGE AVE MELROSE PARK, IL 60160 **Fax:**

I hereby authorize this company to release all records of employment, including assessments of my job previous ability, and fitness( including dates of any and all alcohol or drug tests, those confirmed results, and/or my refusing to any alcohol or drug tests and any rehabilitation completion under direction of SAP/MRO) to each and every company( their authorized agents) which may request such information in connection with my application for employment company, I hereby release this company, and its employees, officers, directors, and agents from any and all liable type as a result of providing the following information to the below mentioned person and/or company.

  
Chase Ryan Owens (Dec 1, 2023 16:04 CST)  
Safety Manager (Dec 8, 2023 15:48 CST)

Applicant's Signature

Company representative

**Dear Personnel Manager**

The person named herein has applied to this company for employment in a safety-sensitive position, Your finding the applicant as a past employer. Will you kindly reply to this inquiry respecting this applicant. As you will read waiver stated above, all liability of you and your company has been released by the applicant.

**PLEASE BE ADVISED!** You may reply by FAX +1 630 485 6980 or e-mail: [safety@royal3inc.com](mailto:safety@royal3inc.com).

Name of Applicant: Chase Ryan Owens SSN: 644106976 Job Applying For: OTR Driver

Did the Applicant work for you as a driver: Yes No

If No, please explain: \_\_\_\_\_

If employed as a driver, please answer the following: Start Date : \_\_\_\_\_ End Date : \_\_\_\_\_

☐ Company Driver ☐ Owner/Operator ☐ Other? \_\_\_\_\_

Type of tractor operated: \_\_\_\_\_ Type of trailer pulled: \_\_\_\_\_

Other equipment operated: \_\_\_\_\_ Commodities operated: \_\_\_\_\_

Accidents: ☐ Yes ☐ No If yes, please give the date and brief description of each accident: \_\_\_\_\_Traffic Violations: ☐ Yes ☐ No If yes, please list all including the date and type of violation: \_\_\_\_\_**INQUIRY FOR ALCOHOL AND CONTROLLED SUBSTANCES INFORMATION**Alcohol tests with a result of 0.04 or greater? ☐ Yes ☐ No If yes, please give date: \_\_\_\_\_Verified positive controlled substances test results? ☐ Yes ☐ No If yes, please give date: \_\_\_\_\_Refusals to be tested? ☐ Yes ☐ No If yes, please give date: \_\_\_\_\_Rehab completed under direction of SAP/MRO? ☐ Yes ☐ No If yes, please give date: \_\_\_\_\_

Any problems with bonding? Yes No If yes, please explain: \_\_\_\_\_

Why did this employee leave your company? \_\_\_\_\_

Would you re-employee this person? ☐ Yes ☐ No If no, please explain: \_\_\_\_\_

Additional comments: ( Any problems with customer relations, supervision, or abuse of equipment? \_\_\_\_\_

Name/Title (of person providing the above information): \_\_\_\_\_

Company: \_\_\_\_\_

Date: \_\_\_\_\_