

## Request / Response Report

Response Tracking ID: (None)

Request #: 44782818

## Jordan Carriers

Provided By: **Emily Presley**  
 Title: **(N/A)**  
 Address: **170 Hwy 61 S.**  
 City / State / Zip: **Natchez, MS 39120**  
 Email: **kristinew@jordancarriers.com**  
**epresley@jordancarriers.com**  
 Phone: **601-446-1094**  
 Fax:  
 Items Requested: **EMP**

[Questions about this report?](#)

## Requested Subject Information

Denotes a value not equal to the Provided value**Leslie Vernard Jones**SSN: **xxx-xx-8398**DOB: **07-05-1989**Date Range Requested: **05-2019 to 02-2023**

## Provided Subject Information

Denotes a value not equal to original Requested value**LESLIE JONES**SSN: **xxx-xx-8398**DOB: **07-05-1989**Date Range Provided: **06-2019 to 10-2019**

## Original Request Information

## Provided Information

Position Held	
Reason For Leaving	
Driver Class	
Driver Type	
Was the driver Terminated?	
Was the driver subject to FMCSRs while employed?	
Was the driver's job designated as a safety sensitive function in DOT regulated mode subject to Drug and Alcohol testing per 49 CFR Part 40?	
Areas Driven	
Equipment Driven	
Trailer Driven	
Loads Hauled	

Position Held	<b>COMPANY DRIVER</b>
Reason For Leaving	<b>RESIGNED</b>
Driver Class	<b>Company</b>
Driver Type	<b>Solo</b>
Was the driver Terminated?	<b>Yes</b>
Termination Reason:	<b>UNSATISFACTORY SAFETY RECORD</b>
Eligible for Rehire?	<b>Review</b>
Was the driver subject to FMCSRs while employed?	<b>Yes</b>
Was the driver's job designated as a safety sensitive function in DOT regulated mode subject to Drug and Alcohol testing per 49 CFR Part 40?	<b>Yes</b>
Full Time / Part Time	<b>FULL TIME</b>
Areas Driven	<b>OTR</b>
Equipment Driven	<b>Tractor-Trailer</b>
Trailer Driven	<b>Flatbed</b>
Loads Hauled	<b>STEEL, LUMBER, PIPE</b>
Miles per week	
Number of States Driven	<b>39 STATES</b>

Trailer Length

53 FT

### Activity Log

12-13-2023 10:21 AM - Emily Presley (Jordan Carriers)

Response added. Request #44782818 status set to "Submitted".

12-12-2023 06:43 AM - Zigi Stamenkovic

Request sent under order #19134166 via **Network** method.

Tenstreet, 120 W. 3rd Street Tulsa, OK 74103.

Drivers: for questions about this report, contact the Tenstreet Consumer Service Department at 877-219-9283, Option 1, then 1 or email:  
[drivers@tenstreet.com](mailto:drivers@tenstreet.com)



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SAFETY PERFORMANCE HISTORY  
RECORDS REQUEST

- CONFIDENTIAL -

**Company:** JORDAN CARRIERS INC (USDOT 494832) **Phone:** (601) 446-8899**Date:** 12/05/23**Address:** 170 HIGHWAY 61 SOUTH NATCHEZ, MS 39120 **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.

  
Leslie Vernard Jones Jr (Dec 5, 2023 12:12 CST)

  
Safety manager (Dec 8, 2023 16:45 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:** Leslie Vernard Jones Jr SSN: 587658398**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: \_\_\_\_\_

Enter Company Name, MC or US DOT number



Create Profile

# ZM TRUCKING LLC

Next Profile

## Trucking Companies

5522 W ROOSEVELT ST 4



PHOENIX, AZ 85043

Inspections

Accident

VINs and Plates

FMCSA Page

FMCSA Safer

Find on Google

Remove my data

Add report

## FMCSA Carrier Authority Information for ZM TRUCKING LLC

ZM TRUCKING LLC is an Inactive carrier operating under USDOT Number 2627070 an MC Number 913744

Update info

Operating Status	Inactive
USDOT	2627070
MC NUMBER	MC-913744
Last Safer Update	11-15-2023
Last FMCSA Update	11-15-2023
Out of Service Date	None
Entity Type	Carrier
Legal Name	ZM TRUCKING LLC
Total Trucks	1
Total Drivers	2
Carrier Operation	Interstate
Hazardous Material	No
MCS-150 Mileage Year	2022
MCS-150 DATE	N
MCS-150 MILEAGE	126530



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SAFETY PERFORMANCE HISTORY  
RECORDS REQUEST

- CONFIDENTIAL -

**Company:** ZM TRUCKING LLC (USDOT 2627070)**Phone:****Date:** 12/05/23**Address:** INACTIVE**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.

Leslie Vernard Jones Jr (Dec 5, 2023 12:12 CST)

Safety manager (Dec 8, 2023 16:45 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:** Leslie Vernard Jones Jr SSN: 587658398**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: \_\_\_\_\_

[Print](#)[Set This Request Complete](#)**Request / Response Report**

Response Tracking ID: (None)

Request #: 44782835

**Jowin Express, Inc**

Provided By: **Benjamin Ball**  
Title: **(N/A)**  
Address: **1498 Highway 13 N**  
City / State / Zip: **Columbia, MS 39429**  
Email: **benjamin@jowinexpress.com**  
Phone: **601-736-0938**  
Fax: **610-731-5711**  
Items Requested: **EMP**

[Questions about this report?](#)**Provided Subject Information****Leslie Vernard Jones**

SSN: **xxx-xx-8398**  
DOB: **07-05-1989**

Date Range Provided: **10-2023 to 11-2023****Original Request Information**

Position Held	
Reason For Leaving	
Driver Class	
Driver Type	
Was the driver Terminated?	
Was the driver subject to FMCSRs while employed?	
Was the driver's job designated as a safety sensitive function in DOT regulated mode subject to Drug and Alcohol testing per 49 CFR Part 40?	
Areas Driven	
Equipment Driven	
Trailer Driven	
Loads Hauled	

**Provided Information**

Position Held	<b>otr driver</b>
Reason For Leaving	<b>terminated</b>
Driver Class	<b>Company</b>
Driver Type	<b>Solo</b>
Was the driver Terminated?	<b>Yes</b>
Termination Reason:	<b>company policy violation</b>
Eligible for Rehire?	<b>No</b>
Was the driver subject to FMCSRs while employed?	<b>Yes</b>
Was the driver's job designated as a safety sensitive function in DOT regulated mode subject to Drug and Alcohol testing per 49 CFR Part 40?	<b>Yes</b>
Full Time / Part Time	<b>full time</b>
Areas Driven	<b>otr</b>
Equipment Driven	<b>Tractor-Trailer</b>
Trailer Driven	<b>Flatbed</b>
Loads Hauled	<b>lumber steel brick</b>
Miles per week	<b>2500</b>
Number of States Driven	<b>12</b>
Trailer Length	<b>53</b>

**Activity Log**

01-04-2024 12:13 PM - Benjamin Ball (Jowin Express, Inc)

Response added. Request #44782835 status set to "Submitted".

12-27-2023 03:19 PM - Zigi Stamenkovic

Request Re-sent via Network method

12-19-2023 06:06 AM - Zigi Stamenkovic

Request Re-sent via Network method

12-12-2023 06:46 AM - Zigi Stamenkovic

Request sent under order #19134175 via **Network** method.

Tenstreet, 120 W. 3rd Street Tulsa, OK 74103.

Drivers: for questions about this report, contact the Tenstreet Consumer Service Department at 877-219-9283, Option 1, then 1 or email:  
[drivers@tenstreet.com](mailto:drivers@tenstreet.com)



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SAFETY PERFORMANCE HISTORY  
RECORDS REQUEST

- CONFIDENTIAL -

**Company:** JOWIN EXPRESS INC (USDOT 221478)**Phone:** (601) 736-0938**Date:** 12/05/23**Address:** 1498 HIGHWAY 13 N COLUMBIA, MS 39429**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.

Leslie Vernard Jones Jr (Dec 5, 2023 12:12 CST)

Safety manager (Dec 8, 2023 16:45 CST)

Applicant's Signature

Company representative

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**Name of Applicant:** Leslie Vernard Jones Jr SSN: 587658398**Job Applying For:** OTR Driver

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

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

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

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

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

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

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

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

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

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