

Public Burden Statement

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U.S. Department of Transportation
Federal Motor Carrier
Safety Administration

Medical Examiner's Certificate

(for Commercial Driver Medical Certification)

CMV DRIVER CERTIFICATION

I certify that I have examined (last name) Molina (first name) Ariel in accordance with (please check only)

☒ the Federal Motor Carrier Safety Regulations (49 CFR 391.61-61.65) and, with knowledge of the driving duties, I find this person is qualified, and, if applicable, only when (check all that apply) OR

☐ the Federal Motor Carrier Safety Regulations (49 CFR 391.61-61.65) with any applicable State variances (which will only be valid for intrastate operations), and, with knowledge of the driving duties, I find this person is qualified,

☐ Wearing corrective lenses

☐ Accompanied by a waiver/exemption (specify type):

☐ Driving within an exempt intracity zone (49 CFR 391.62) (Federal)

☐ Wearing hearing aid

☐ Accompanied by a Skill Performance Evaluation (SPE) Certificate

☐ Qualified by operation of 49 CFR 391.64 (Federal)

☐ Grandfathered from State requirements (State)

The information I have provided regarding this physical examination is true and complete. A complete Medical Examination Report Form, MCSA-5575, with any attachments embodies my findings completely and correctly, and is on file in my office.

Medical Examiner's Certificate Expiration Date

04/03/2025

MEDICAL EXAMINER INFORMATION**Medical Examiner's Signature**

Medical Examiner's Name (please print or type)
Hensley, Lauren

Medical Examiner's Telephone Number
(954) 564-2592

Date Certificate Signed
04/03/2023

☐ MD ☐ Physician Assistant ☐ Advanced Practice Nurse
☐ DO ☐ Chiropractor ☐ Other Practitioner (specify)

Medical Examiner's State License, Certificate, or Registration Number
OS17522

Issuing State
FL

National Registry Number
7244561443

CMV DRIVER INFORMATION**Driver's Signature**

Driver's Address

Driver's License Number
M450000710140

Issuing State/Province
FL

Street Address: 5900 SW 42nd Ct Bldg 23

City: Davie

State/Province: FL

Zip Code: 33314-3602

CLP/CDL Applicant/Holder

☒ Yes ☐ No

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Search Medical Examiners

City, State or Zipcode

National Registry Number Business Name

First Name Last Name

Basic Search

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Dr. Lauren Hetsley (Doctor Of Osteopathy)
Governers Medical Center
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(954) 474-4423 [N/A Directions](#)

