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SAFETY PERFORMANCE HISTORY  
RECORDS REQUEST

- CONFIDENTIAL -

**Company:** STAR TRANSPORTATION PA INC (DOT: 1437731) **Phone:** 267 397 8040**Date:** 12/05/23**Address:** 301 NW 171ST ST MIAMI GARDENS, FL 33169 **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.

Ariel Molina  
Ariel Molina (Dec 5, 2023 14:42 EST)

Sara Todorovic  
Sara Todorovic (Dec 5, 2023 14:44 EST)

Applicant's Signature

Company representative

8YUf DYfgcbby A UbU Yf

H Y dYfgcb bUa YX \ YfY]b \ Ug Udd JYX hc H Jg Wda dUbmZcf Ya d'cna Ybh]b UgUZ/magYbg]hij Y d'cg]hcbZMci f Z]bX]b H Y Udd J]WbhUg U dUghYa d'cnyf K J nci J]bX mfyd mhc H Jg]bei JfmfygdYV]b H Jg Udd J]Wbh 5g nci k J fYUX k Uij Yf gUHYX Uvcj YZU JUV J]mcZnci UbX nci f Wda dUbm Ug VYYb fY YUgYX VmH Y Udd J]Wbt

**PLEASE BE ADVISED!** Mci a Umfyd nby FAX +1 630 485 6980 or e-mail: [safety@royal3inc.com](mailto:safety@royal3inc.com).

Name of Applicant:

Ariel Molina

SSN: 591453205

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 : 07/2023 End Date : 10/2023

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

Type of tractor operated: Tractor-Trailer Type of trailer pulled: Van

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

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): Olha Zykova

Company: Star Transportation PA, Inc

Date: 12/26/2023



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Name of Applicant: Ariel Molina

SSN: 591453205

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: \_\_\_\_\_

☒ USDOT Number ☐ MC/MX Number ☐ Name

Enter Value: 1057970

Search

## Company Snapshot

OPTION TRANSPORT INC

USDOT Number: 1057970

### 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](#).

Entity Type:	CARRIER																																
Operating Status:	NOT AUTHORIZED	Out of Service Date:	None																														
Legal Name:	OPTION TRANSPORT INC																																
DBA Name:																																	
Physical Address:	11425 SW 252ND ST HOMESTEAD, FL 33032																																
Phone:	(305) 978-2380																																
Mailing Address:	11425 SW 252ND ST HOMESTEAD, FL 33032																																
USDOT Number:	1057970	State Carrier ID Number:																															
MC/MX/FF Number(s):	MC-442660	DUNS Number:	--																														
Power Units:	2	Drivers:	2																														
MCS-150 Form Date:	09/25/2023	MCS-150 Mileage (Year):	176,684 (2022)																														
Operation Classification:																																	
<table><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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Cargo Carried:																																	
<table><tr><td><input checked="" type="checkbox"/> General Freight</td><td>Liquids/Gases</td><td>Chemicals</td></tr><tr><td>Household Goods</td><td>Intermodal Cont.</td><td>Commodities Dry Bulk</td></tr><tr><td>Metal: sheets, coils, rolls</td><td>Passengers</td><td>Refrigerated Food</td></tr><tr><td>Motor Vehicles</td><td>Oilfield Equipment</td><td>Beverages</td></tr><tr><td>Drive/Tow away</td><td>Livestock</td><td>Paper Products</td></tr><tr><td>Logs, Poles, Beams, Lumber</td><td>Grain, Feed, Hay</td><td>Utilities</td></tr><tr><td>Building Materials</td><td>Coal/Coke</td><td>Agricultural/Farm Supplies</td></tr><tr><td>Mobile Homes</td><td>Meat</td><td>Construction</td></tr><tr><td>Machinery, Large Objects</td><td>Garbage/Refuse</td><td>Water Well</td></tr><tr><td>Fresh Produce</td><td>US Mail</td><td></td></tr></table>				<input checked="" type="checkbox"/> General Freight	Liquids/Gases	Chemicals	Household Goods	Intermodal Cont.	Commodities Dry Bulk	Metal: sheets, coils, rolls	Passengers	Refrigerated Food	Motor Vehicles	Oilfield Equipment	Beverages	Drive/Tow away	Livestock	Paper Products	Logs, Poles, Beams, Lumber	Grain, Feed, Hay	Utilities	Building Materials	Coal/Coke	Agricultural/Farm Supplies	Mobile Homes	Meat	Construction	Machinery, Large Objects	Garbage/Refuse	Water Well	Fresh Produce	US Mail	
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