Zigi Freight Inc. dba Royal 3, Inc. 6850 W. 63rd St. Chicago, IL 60638

February 12, 2024

RE: Employee Verification Requests for Reinerio Morales Capote from ABRAHANTES CAR TRANSPORT INC.

To whom it may concern:

As of January 12, 2024 I have made the following attempts to contact ABRAHANTES CAR TRANSPORT INC in order to verify Reinerio Morales Capote's employment there.

The first attempt was made on January 26, 2024 when I sent a request at <u>ABRAHANTESCT@outlook.com</u> which was recommended by safety person when I reached out through phone to their office.

On January 30, 2024 I re-sent request completing the second attempt and on February 6, 2024 I have made a third and final attempt. A formal response from ABRAHANTES CAR TRANSPORT INC was never received.

Sincerely,

Kristina Milacic

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Employment Verification for Reinerio Morales Capote

Employment Verifications <ev@royal3inc.com> To: ABRAHANTESCT@outlook.com Tue, Feb 6, 2024 at 1:47 PM

Hello,

I am a safety officer from Royal3 INC company. I am sending you this email to confirm Reinerio Morales Capote'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 <u>HR Department</u> <u>Zigi Freight dba Royal 3 Inc.</u> 6850 W. 63rd St. Chicago, IL 60638 p. 630-566-2119 f. 630-485-6980 e. ev@royal3inc.com

03DQ R3_Reinerio Morales Capote-3.pdf



Employment Verification for Reinerio Morales Capote

Employment Verifications <ev@royal3inc.com> To: ABRAHANTESCT@outlook.com Tue, Jan 30, 2024 at 10:48 PM

Hello,

I am a safety officer from Royal3 INC company. I am sending you this email to confirm Reinerio Morales Capote'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 <u>HR Department</u> <u>Zigi Freight dba Royal 3 Inc.</u> 6850 W. 63rd St. Chicago, IL 60638 p. 630-566-2119 f. 630-485-6980 e. ev@royal3inc.com

03DQ R3_Reinerio Morales Capote-3.pdf



Employment Verification for Reinerio Morales Capote

Employment Verifications <ev@royal3inc.com> To: ABRAHANTESCT@outlook.com Fri, Jan 26, 2024 at 9:44 PM

Hello,

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

Thank you!

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Kind regards, Sofia <u>HR Department</u> <u>Zigi Freight dba Royal 3 Inc.</u> 6850 W. 63rd St. Chicago, IL 60638 p. 630-566-2119 f. 630-485-6980 e. ev@royal3inc.com

> 03DQ R3_Reinerio Morales Capote-3.pdf 897K





F



(786) 287-9662



1.30.24.

Outgoing call 13:09 (39 sec)

From (630) 566-2119 (me)

(786) 287-9662 Phone number

Create new contact

Add to existing contact

Block and report







F



(786) 287-9662



1.26.24.

Outgoing call 12:09 (45 sec)

From (630) 566-2119 (me)

(786) 287-9662 Phone number

Create new contact

Add to existing contact

Block and report







F



(786) 287-9662



1.16.24.

Outgoing call 12:40 (41 sec)

From (630) 566-2119 (me)

(786) 287-9662 Phone number

Create new contact

Add to existing contact

Block and report





SAFETY PERFORMANCE HISTORY RECORDS REQUEST

- CONFIDENTIAL -

Company: ABRAHANTES CAR TRANSPORT INC (DOT2480240) Phone: (786) 287-9662

Date: 01/12/24

Address: 3780 NW 13TH ST MIAMI, FL 33126

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.

Fax:

1

Reinerio Morales (Jan 12, 2024 15:46 EST)

Kn	
Safety Department (Jan 12, 2024 16:11 EST)	

Applicant's Signature

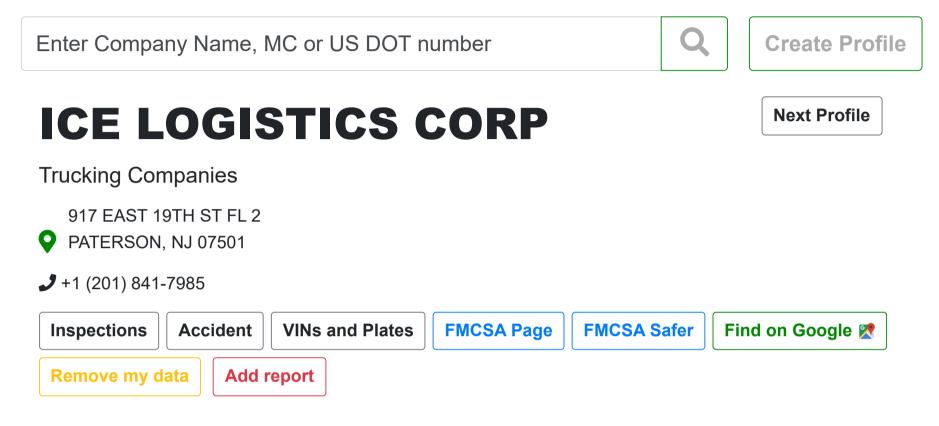
Company representative

8YUf DYfgobbY`A UbU[Yf H\Y'dYfgobbV`A UbU[Yf Udd`]VUbhUgU'dUghYa d`onYf"K]``nci _]bX`mfYd`mho'h\]g'Jbei]fmfYgdYVM[b['h\]g'Udd`]VUbhU'5g'nci 'k]``fYUX'k U]j Yf ghUhYX UVcj YžU```]UV]`]mcZnci 'UbX`nci f Veta dUbm\UgVYYb fY`YUgYX'Vmh\Y'Udd`]VUbt" <u>PLEASE BE ADVISED/</u>'Nci 'a UmfYd`mby FAX +1 630 485 6980 or e-mail: safety@royal3inc.com.

Name of Applicant: Reinerio Morales Capote SSN: 772689376

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?
Rehab completed under direction of SAP/MRO?
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:



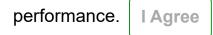
FMCSA Carrier Authority Information for ICE LOGISTICS CORP

ICE LOGISTICS CORP is an carrier operating under USDOT Number 3246348 an MC Number 1020729

Update info

	opatemo
Operating Status	Out Of Service
USDOT	3246348
MC NUMBER	MC-1020729
Last Safer Update	01-03-2023
Last FMCSA Update	09-11-2023
Out of Service Date	2022-10-04
Entity Type	Carrier
Legal Name	ICE LOGISTICS CORP
Total Trucks	33

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SAFETY PERFORMANCE HISTORY RECORDS REQUEST

- CONFIDENTIAL -

Phone: 905-672-7747 Fax: Date: 01/12/24

Company: ICE LOGISTICS CORP (DOT3246348) - INACTIVE *Address:* 917 East 19th St FI 2, Paterson, NJ, 7501

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.

2

Reinerio Morales (Jan 12, 2024 15:46 EST)

Kn	
Safety Department (Jan 12, 2024 16:11 EST)	

Applicant's Signature

Company representative

8YUf DYfgobbY`A UbU[Yf H\Y'dYfgobbV`A UbU[Yf Udd`]VUbhUgU'dUghYa d`onYf"K]``nci _]bX`mfYd`mho'h\]g'Jbei]fmfYgdYVM[b['h\]g'Udd`]VUbhU'5g'nci 'k]``fYUX'k U]j Yf ghUhYX UVcj YžU```]UV]`]mcZnci 'UbX`nci f Veta dUbm\UgVYYb fY`YUgYX'Vmh\Y'Udd`]VUbt" <u>PLEASE BE ADVISED/</u>'Nci 'a UmfYd`mby FAX +1 630 485 6980 or e-mail: safety@royal3inc.com.

Name of Applicant: Reinerio Morales Capote SSN: 772689376

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?
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: