

Public Burden Statement

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Medical Examiner's Certificate

(for Commercial Driver's License)

I certify that I have examined Last Name: ACOSTAFirst Name: NELSON

in accordance with applicable regulations.

- ☒ the Federal Motor Carrier Safety Regulations (49 CFR 391.41-391.45) and, with knowledge of the driving duties, I find this person is qualified, and, if applicable, only when checked, all that apply; OR
- ☐ the Federal Motor Carrier Safety Regulations (49 CFR 391.41-391.45) with any applicable State variances (which will only be valid for interstate operations), and, with knowledge of the driving duties, I find this person is qualified, and, if applicable, only when checked, all that apply:

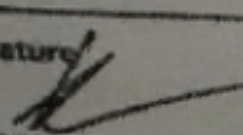
- ☒ Wearing corrective lenses ☐ Accompanied by a _____ with exemption ☐ Driving within an exempt intrastate zone (49 CFR 391.61, deced)
- ☐ Wearing hearing aid ☐ Accompanied by a Skill Performance Evaluation (SPE) Certificate ☐ Qualified by operation of 49 CFR 391.63 (Federal)
- ☐ Grandfathered from State requirements (State)

The information I have provided regarding this physical examination is true and complete. A complete Medical Examination Report Form, MCSA-5875, with any attachments embodies my findings completely and correctly, and is on file in my office.

Medical Examiner's Certificate Expiration Date:

10/25/2024

Medical Examiner's Signature

Medical Examiner's Telephone Number
305-652-3614Date Certificate Signed
10/25/2022

Medical Examiner's Name (please print or type)

VICTOR P. KRESTOWMedical Examiner's State License, Certificate, or Registration Number
ME 9814

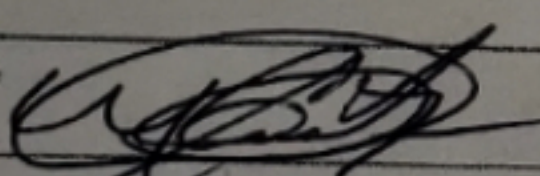
☒ MD ☐ Physician Assistant ☐ Advanced Practice Nurse

☐ DO ☐ Chiropractor ☐ Other Practitioner (Specify) _____

Issuing State

FLNational Registry Number
2287679143

Driver's Signature



Driver's License Number

A223-620-67-005-0

Issuing State/Province

FL

Driver's Address

Street Address: 15480 SW 284th st #2312 HOMESTEADState/Province: FLZip Code: 33033CLP/CDL Applicant/Holder
☒ Yes ☐ No

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First Name: Last Name:

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 Dr. Victor Krestow (Medical Doctor)

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 N/A [Directions](#)



NW 185th Dr

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