# Zigi Freight Inc. dba Royal 3, Inc. 6850 W. 63<sup>rd</sup> St. Chicago, IL 60638

#### April 24, 2024

RE: Employee Verification Requests for Charlot Desinor from HILL BILLY TRUCKING LLC.

To whom it may concern:

As of March 27, 2024 I have made the following attempts to contact HILL BILLY TRUCKING LLC in order to verify Charlot Desinor's employment there.

The first attempt was made on April 1, 2024 when I sent a request at <a href="SAFETY@hillbillycarrier.com">SAFETY@hillbillycarrier.com</a> which was recommended by safety person when I reached out through phone to their office.

On April 8, 2024 I re-sent request completing the second attempt and on April 12, 2024 I have made a third and final attempt. A formal response from HILL BILLY TRUCKING LLC was never received.

Sincerely,

Kristina Milacic

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# **Employment Verification for Charlot Desinor**

**Employment Verifications** <ev@royal3inc.com> To: SAFETY@hillbillycarrier.com Fri, Apr 12, 2024 at 9:17 PM

Hello,

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

Sofia

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

03DQ Royal 3 Inc\_Charlot Desinor-3.pdf 895K



# **Employment Verification for Charlot Desinor**

**Employment Verifications** <ev@royal3inc.com> To: SAFETY@hillbillycarrier.com Mon, Apr 8, 2024 at 10:07 PM

Hello,

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

Sofia

HR Department
Zigi Freight dba Royal 3 Inc.
6850 W. 63rd St.
Chicago, IL 60638
p. 630-566-2119
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# **Employment Verification for Charlot Desinor**

1 message

Employment Verifications <ev@royal3inc.com>

Mon, Apr 1, 2024 at 10:31 PM

To: SAFETY@hillbillycarrier.com

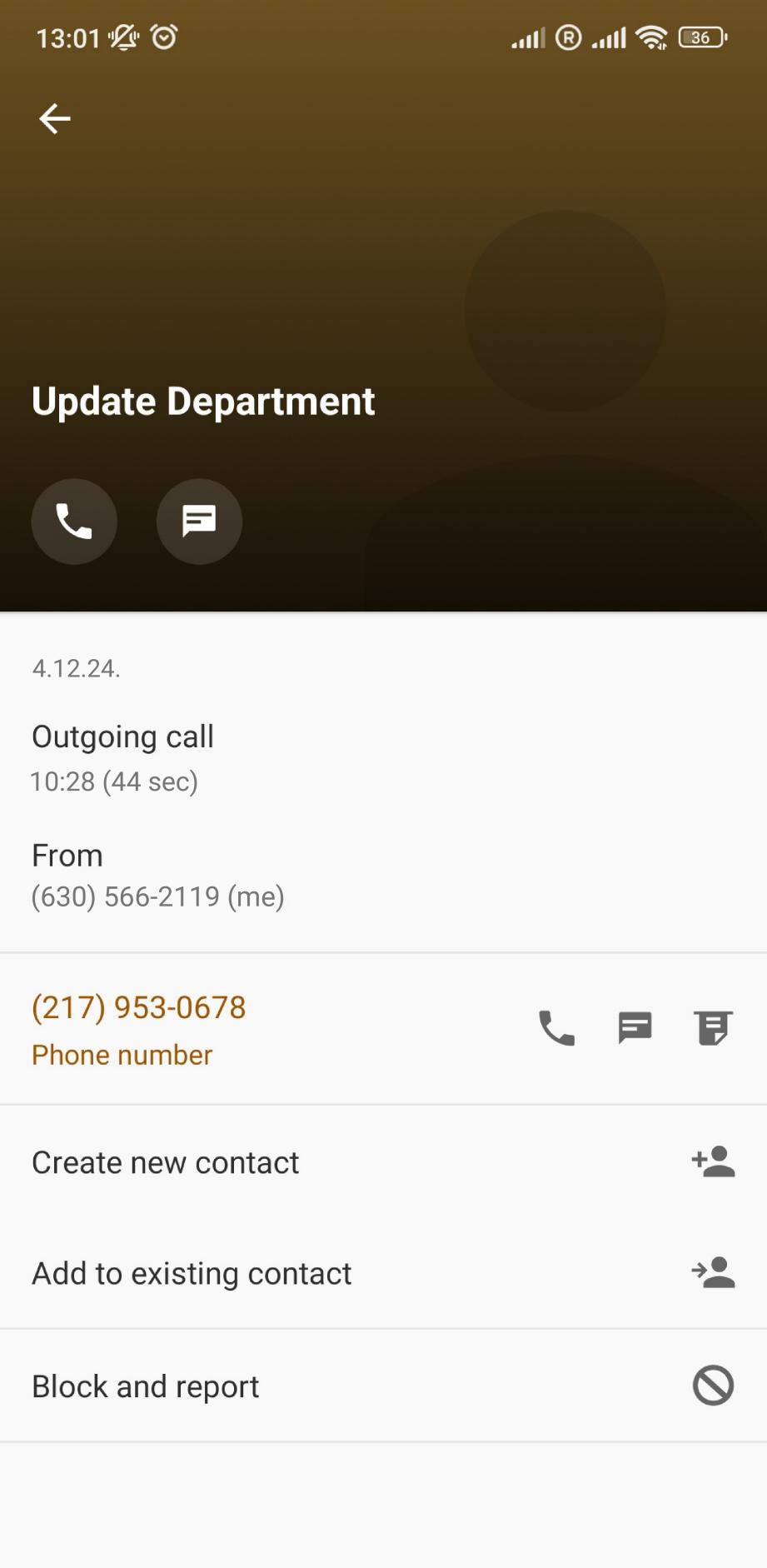
Hello,

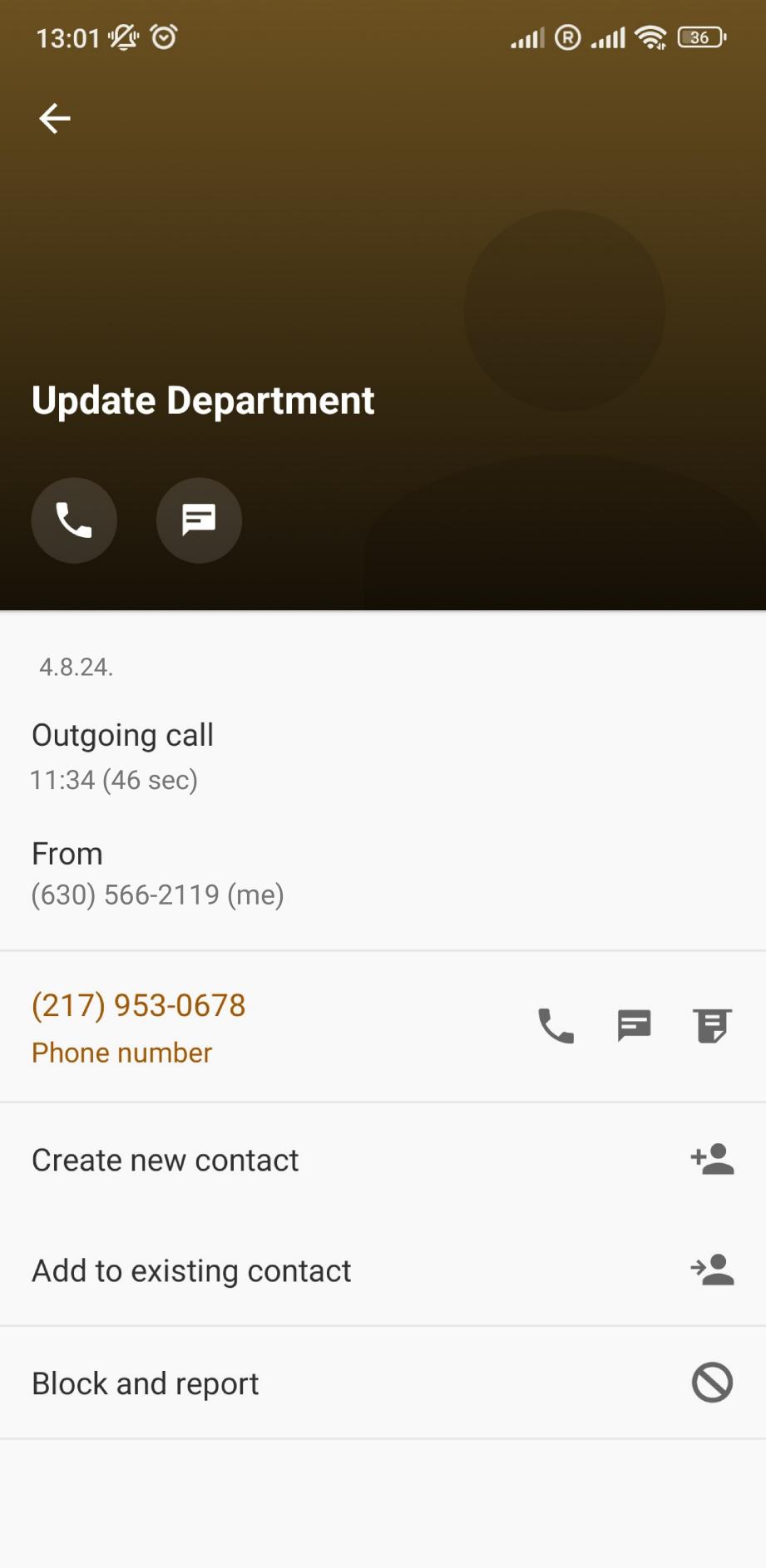
I am a safety officer from Royal3 INC company.
I am sending you this email to confirm Charlot Desinor's employment with your company.
Please find the attached form, and send it back to me at your earliest convenience.
Thank you!

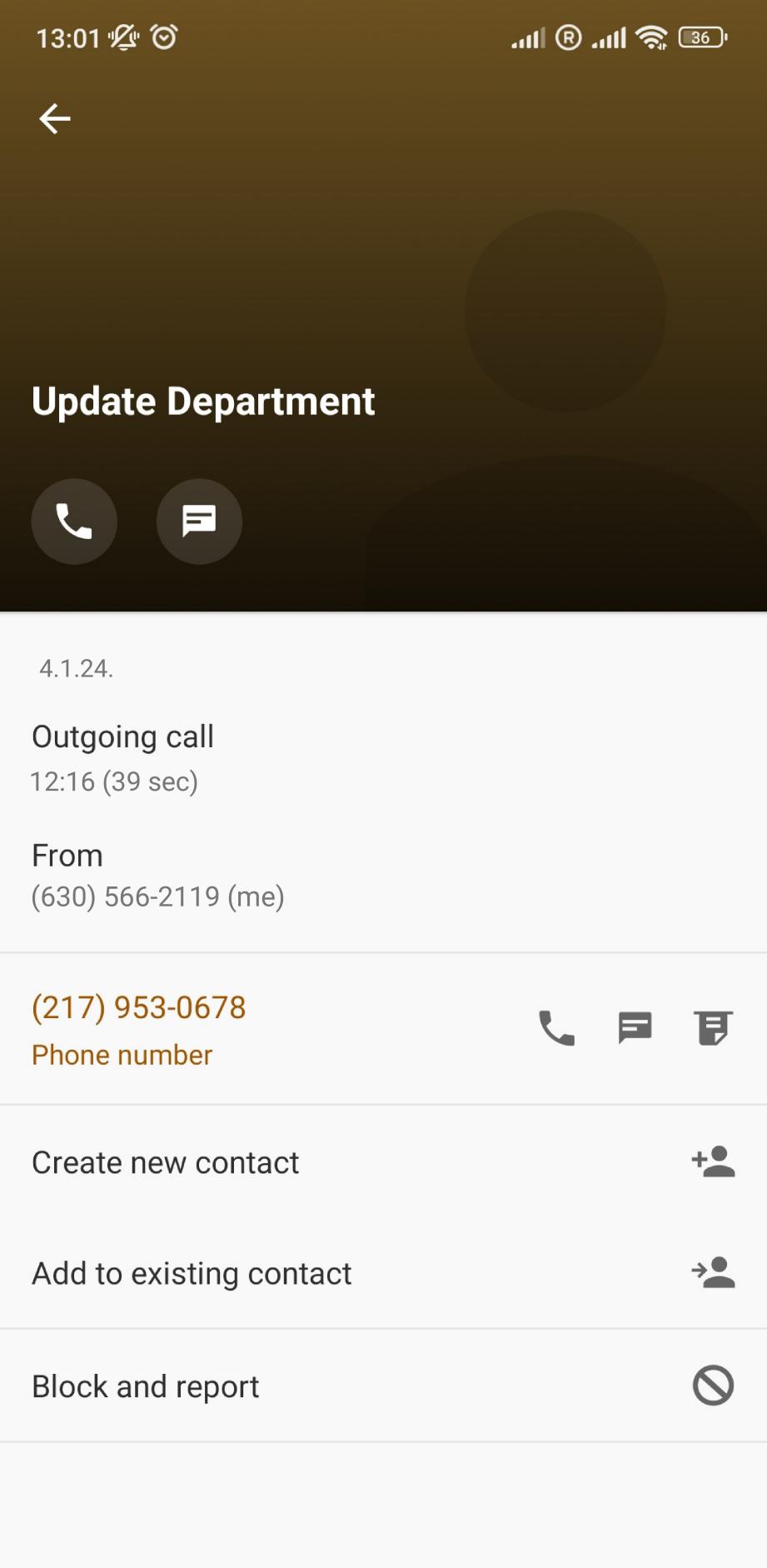
Sofia

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# SAFETY PERFORMANCE HISTORY **RECORDS REQUEST**

# - CONFIDENTIAL -

Date: 03/27/24

Company: HILL BILLY TRUCKING LLC (DOT3533973) Phone: (217) 953-0678

Address: 100 E CAMPUS VIEW BLVD STE 250 COLUMBUS, OH 43235 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( connection with my application for employment company, I hereby rele	ease this company, and its employees, officers, directors, and agents
from any and all liable type as a result of providing the following inforr	hadion to the below mentioned person and/or company. $\mathcal{L}$
Charlot Desinor (Mar 27, 2024 15:23 EDT)	Kristina Milacic (Mar 27, 2024 15:25 EDT)
Applicant's Signature	Company representative
8YUf DYfgcbbY`A UbU[Yf H\Y`dYfgcb`bUa YX`\YfY]b`\Ug`Udd`]YX`hc`h\]g`Wa dUbmZcf`Ya o Udd`]WIbh`Ug`U`dUgh`Ya d`cnYf'''K ]```nci '_]bX`mfYd`mhc`h\]g`]bei UVcj YžU```]UV]`]ImicZnci 'UbX`nci f`Wa dUbm\Ug`VYYb`fY`YUgYX <u>PLEASE BE ADVISED!</u> ' Nci 'a UmfYd`mby FAX +1 630 485 6980	i]fmfYgdYVM[b["h\]g'Udd`]VMbH"5g'nci k]``fYUX'kU]jYf'gHJHYX X'Vn'h\Y'Udd`]Wbt"
Name of Applicant: Charlot Desinor SSN: 5906	14511 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 : _  Company Driver Owner/Operator Other?	End Date :
Type of tractor operated: Type of trailer	pulled:
Other equipment operated: Commodities op	perated:
Accidents: Yes No If yes, please give the date and brief d	lescription 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 INFO	ORMATION
Alcohol tests with a result of 0.04 or greater?	If yes, please give date:
Verified positive controlled substances test results?	If yes, please give date:
Refusals to be tested?	If yes, please give date:
Rehab completed under direction of SAP/MRO?	If yes, please give date:
Any problems with bonding? Yes No If yes, please explain	1:
Why did this employee leave your company?	
Would you re-employee this person? Yes No If no, please	e explain:
Additional comments: ( Any problems with customer relations, supervi	sion, or abuse of equipment?
Name/Title (of person providing the above information):	
- ·	_

Royal3 Inc.

Equipment Driven	and Alcohol testing per 49 CFR Part 40?	
Trailer Driven Loads Hauled	Full Time / Part Time	Full Time
	Areas Driven	OTR
	Equipment Driven	Tractor-Trailer
	Trailer Driven	Van
	Loads Hauled	General freight
	Miles per week	

Number of States Driven

Trailer Length

48 states

53ft

## **Activity Log**

04-08-2024 03:23 PM - Suzana Skrbic (Point Logistics, Inc.)

Response added. Request #46582389 status set to "Submitted".

04-08-2024 03:05 PM - Zigi Stamenkovic

Request Re-sent via Network method

04-01-2024 03:26 PM - Zigi Stamenkovic

Request sent under order #19815066 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: <a href="mailto:drivers@tenstreet.com">drivers@tenstreet.com</a>



# SAFETY PERFORMANCE HISTORY RECORDS REQUEST

### CONFIDENTIAL -

Date: 03/27/24 Company: POINT LOGISTICS LLC (DOT2459419) Phone: (630) 481-7066 Address: 18W140 BUTTERFIELD RD SUITE 1500 OAKBROOK TERRACE, IL 60181 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. Kristina Milacic (Mar 27, 2024 15:25 EDT) Desinor (Mar 27, 2024 15:23 EDT) Applicant's Signature Company representative 8YUf DYfqcbbY A UbU[ Yf HAY dYfqcb bUa YX \YfY]b \ Uq Udd`]YX hc hA]q Waa dUbmZcf Ya d`cna Ybh]b U qUZYmhqYbqjhji Y dcqjhjcbžiMci f ZjbX]b[ hAY Udd`]WNbh'Ug'U'dUghYad`cnYf"K]``noci \_]bX`mfYd`nnhc'h\]g']bei]fmfYgdYWN]b['h\]g'Udd`]WNbh''5g'noci k]``fYUX'kU]jYf'ghUhYX UVcj YžU```]UV]]ImrcZnci 'UbX'nci f Wa dUbm\ Ug'VYYb fY`YUgYX Vmh\ Y 'Udd`]Wbt"

PLEASE BE ADVISED! Mci 'a UmfYd'mby FAX +1 630 485 6980 or e-mail: safety@royal3inc.com.

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Charlot Desinor ssn: 590614511 Job Applying For: OTR Driver Name of Applicant: Did the Applicant work for you as a driver: Yes Nο If No, please explain: \_\_\_ Start Date : \_\_\_\_\_\_ End Date : \_\_\_\_\_ If employed as a driver, please answer the following: Other? Company Driver Owner/Operator 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: \_\_\_\_ No Rehab completed under direction of SAP/MRO? Yes If yes, please give date: \_\_\_\_\_ Any problems with bonding? If yes, please explain:\_\_ Yes No 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: \_\_\_\_

Royal3 Inc.