



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

Medical Examiner's Certificate (for Commercial Driver Medical Certification)

I certify that I have examined Triana Last Name: Felix First Name: Felix in accordance with (please check only one):

- ☒ the Federal Motor Carrier Safety Regulations (49 CFR 391.41-391.49) and, with knowledge of the driving duties, I find this person is qualified, and, if applicable, only when (check all that apply): ☒
☐ the Federal Motor Carrier Safety Regulations (49 CFR 391.41-391.49) 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, and, if applicable, only when (check all that apply):

- ☐ Wearing corrective lenses ☐ Recompensation ☐ Waiver/exemption ☐ Driving within an exempt intracity zone (49 CFR 391.62) (Federal)
☐ Wearing hearing aid ☐ Recompensation No valid Performance Evaluation (PE) Certificate ☐ Qualified by operation of 49 CFR 391.64 (Federal)
☐ Grandfathered from State requirements (State)

This information I have provided regarding this person's examination is true and complete. A complete Medical Examination Report Form, MCSA 5875, with any applicable variances, is submitted to the Federal Motor Carrier Safety Administration and is on file in my office.

Medical Examiner's Certificate Expiration Date

1/20/25

Medical Examiner's Signature

Medical Examiner's Name (print full name)

Jonathan Delvalle PA

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

PA 9108086

Medical Examiner's Telephone Number

305-519-2546

Date Certificate Expires

1/20/23

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

Issuing State

FL

National Registry Number

6098636188

Driver's Signature

Driver's License Number

Issuing State/Province

T65524082220 FL

Driver's Address

3731 SW 48 Ave

City

Hollywood

State/Province

FL 33023

CLP/CDL Applicant/Holder

☒ Yes ☐ No



FMCSA

Federal Motor Carrier Safety Administration

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Miles

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Business Name

6098636188

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Mr. Jonathan Delvalle (Physician Assistant)

ACEVEDO MEDICAL GROUP

2400 NW 54 Street Hialeah Gardens, FL 33142

(305) 519-2546

N/A [Directions](#)

Mr. Jonathan Delvalle (Physician Assistant)

ACEVEDO MEDICAL GROUP

2400 NW 54 Street Miami, FL 33142

(305) 519-2546

N/A [Directions](#)

St

NW 135th St

NW 135th St

NW 135th St

NW 135th St

NW 135th St



Query Detail

Query Overview

Employer Conducting Query: RIKI TRANSPORTATION INC (USDOT# 3119062)

Query Result: Driver Not Prohibited

Query Status: Completed (4/12/2024 12:33:22)

Conducted By: RADOSLAV KOVACEVIC

Query Type: Pre-employment

Query Submitted: Manually

Driver Information

Name: FELIX TRIANA MORALES

Date of Birth: 6/22/1987

CDL/CLP ⓘ: US-FL-T655240872220

Consent Information

Requested: 4/12/2024 12:30:48

Recorded: 4/12/2024 12:33:22

Status: Provided

Query History

Created: 4/12/2024 12:30:48

Completed: 4/12/2024 12:33:22

Query Result: Driver Not Prohibited

LEARN MORE

 The Return-to-Duty Process

Open Violations

No Open Violations