

Royal3 Inc.



### SAFETY PERFORMANCE HISTORY RECORDS REQUEST

### - CONFIDENTIAL -

#### Company: BJK TRANSPORTATION INC (DOT2167609) Phone: (773) 717-7802

Date: 04/16/24

Address: 7211 WOLF RD UNIT 109 INDIAN HEAD PARK, IL 60525 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.

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RodrigezCalceran, Yunieski (Apr 16, 2024 12:48 EDT)

_hr	
Kristina Milacic (Apr 16, 2024 12:51 EDT)	

Applicant's Signature

Company representative

8YUf DYfgobbY`A UbU[Yf H\Y'dYfgobbUa YX`\YfY]b`\Ug'Udd`]YX'ho'h\]g'Wda dUbmZof Ya d`ona Ybh]b`U'gUZYhnigYbg]h]j Y'dog]h]obžWbi f`Z]bX]b[`h\Y Udd`]WIbhUg'U'dUghYa d`onYf"K]``noi \_]bX`mfYd`mho'h\]g']bei ]fmfYgdYWIJb[`h\]g'Udd`]WIbh"5gnoi k]``fYUX'k U]j Yf`ghUhYX UVcj Yž'U```]UV]`]hmcZnoi 'UbX'noi f`Vda dUbm\Ug'VYb'fY`YUgYX'Vmh\Y'Udd`]WIbt" <u>PLEASE BE ADVISED/</u>Noi 'a UmfYd`mby FAX +1 630 485 6980 or e-mail: safety@royal3inc.com.

Name of Applicant: Rodriguez Galceran, Yunieski SSN: 787288513

Job Applying For: OTR Driver

Did the Applicant work for you as a driver: Yes No f No, please explain:						
f 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:						
/erified 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:						
Nhy did this employee leave your company?						
Nould 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:						

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

#### May 17, 2024

RE: Employee Verification Requests for Rodriguez Galceran Ynuieski from MARKO POLO EXPRESS LLC.

To whom it may concern:

As of April 16, 2024 I have made the following attempts to contact MARKO POLO EXPRESS LLC in order to verify Rodriguez Galceran Ynuieski's employment there.

The first attempt was made on April 16, 2024 when I sent a request at <u>SAFETY@mpoloex.com</u> which was recommended by safety person when I reached out through phone to their office.

On April 22, 2024 I re-sent completing the second attempt and on April 30, 2024 I have made a third and final attempt. A formal response from MARKO POLO EXPRESS LLC was never received.

Sincerely,

Kristina Milacic

for



#### **Employment Verification for Rodriguez Galceran Ynuieski**

**Employment Verifications** <ev@royal3inc.com> To: SAFETY@mpoloex.com Tue, Apr 30, 2024 at 8:52 PM

Hello,

I am a safety officer from Royal3 INC company.

I am sending you this email to confirm Rodriguez Galceran Ynuieski's employment with your company. Please find the attached form, and send it back to me at your earliest convenience. Thank you!

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 Royal 3 Inc\_Rodriguez Galceran Ynuieski-4.pdf** 



#### **Employment Verification for Rodriguez Galceran Ynuieski**

**Employment Verifications** <ev@royal3inc.com> To: SAFETY@mpoloex.com Mon, Apr 22, 2024 at 10:56 PM

Hello,

I am a safety officer from Royal3 INC company.

I am sending you this email to confirm Rodriguez Galceran Ynuieski's employment with your company. Please find the attached form, and send it back to me at your earliest convenience. Thank you!

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 Royal 3 Inc\_Rodriguez Galceran Ynuieski-4.pdf** 



#### **Employment Verification for Rodriguez Galceran Ynuieski**

**Employment Verifications** <ev@royal3inc.com> To: SAFETY@mpoloex.com Tue, Apr 16, 2024 at 10:32 PM

Hello,

I am a safety officer from Royal3 INC company.

I am sending you this email to confirm Rodriguez Galceran Ynuieski's employment with your company. Please find the attached form, and send it back to me at your earliest convenience. Thank you!

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 Royal 3 Inc\_Rodriguez Galceran Ynuieski-4.pdf** 





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# (910) 400-4002



4.30.24.

Outgoing call

16:05 (36 sec)

From (630) 566-2119 (me)

(910) 400-4002 Phone number

Create new contact

Add to existing contact

Block and report







# (910) 400-4002



4.24.24.

Outgoing call 10:28 (54 sec)

From (630) 566-2119 (me)

(910) 400-4002 Phone number

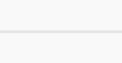
Create new contact

Add to existing contact

Block and report







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# (910) 400-4002



4.17.24.

Outgoing call 13:32 (43 sec)

From (630) 566-2119 (me)

(910) 400-4002 Phone number

Create new contact

Add to existing contact

Block and report

	2	SAFETY F	ERFORMANCE HISTORY			
(P)		RE	CORDS REQUEST			
Royal Zinc.						
		- CONFIDENTIAL -				
<i>Company:</i> MARKO POLO EXPRESS LLC (DOT3080754) <i>Address:</i> 10500 WILD MEADOW WAY FORT WORTH, TX 7610	<i>Phone:</i> (91( <sub>08</sub> <i>Fax:</i>	)) 400-4002	<i>Date:</i> 04/16/24			
I hereby authorize this company to release all records of employm dates of any and all alcohol or drug tests, those confirmed results completion under direction of SAP/MRO) to each and every compa connection with my application for employment company, I hereb from any and all liable type as a result of providing the following in	, and/or my re any( their auth y release this o	fusing to any alcor orized agents) whi ompany, and its ei	ol or drug tests and any rehabilitation ch may request such information in nployees, officers, directors, and agents			
Rodrig ez Galceran, Yunieski (Apr 16, 2024 12:48 EDT)		HA	<u>/-</u>			
Applicant's Signature	Со	mpany representation	ive			
H\Y'dYfgcb bUa YX`\YfY]b`\Ug'Udd`]YX hc'h\]g'Wta dUbmZcf Udd`]WlbhUg'U'dUghYa d`cnYf''K]``nci]bX`mfYd`mhc'h\]g UVcj YžU```]UV]`]hmcZnci UbX nci f Wta dUbm\Ug'VYYb fY`YI <u>PLEASE BE ADVISED!</u> Mci `a UmfYd`mby FAX +1 630 485 6	]bei ]fmfYgd\ UgYX Vmh\Y L 980 or e-mai	/W]b[ `H.]g`Udd`]\ ldd`]Wlbt'' I: safety@royal3	Wohl"5ginci k]``fYUX kUjjYfghUhYX inc.com.			
Name of Applicant: Rodriguez Galceran, Yunieski SSN: 78	37288513	Jo	b 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 Dat	e:	End	Date :			
Company Driver Owner/Operator Other?						
Type of tractor operated: Type of tr	railer pulled:					
Other equipment operated: Commodition	es operated: _					
Accidents: Yes No If yes, please give the date and br	rief description	of each accident:				
Traffic Violations: Yes No If yes, please list all include	ding the date a	nd type of violatio	n:			
INQUIRY FOR ALCOHOL AND CONTROLLED SUBSTANCES	INFORMATIC	)N				
Alcohol tests with a result of 0.04 or greater?	Alcohol tests with a result of 0.04 or greater?					
/erified positive controlled substances test results? Yes No If yes, please give date:						
Refusals to be tested?	No If yes, p	blease give date: _				
Rehab completed under direction of SAP/MRO?	No If yes, p	lease give date: _				
Any problems with bonding? Yes No If yes, please ex	plain:					
Why did this employee leave your company?						
Would you re-employee this person? Yes No If no, pl	lease explain:_					
Additional comments: ( Any problems with customer relations, su	pervision, or at	ouse of equipment	<u>,</u>			
Name/Title (of person providing the above information):						
Company:						
Date:	_					