

Public Burden Statement

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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 Last Name: RODRIGUEZ First Name: GENARO 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) OR
☐ 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 ☐ Accompanied by a _____ waiver/exemption ☐ Driving within an exempt intracity zone (49 CFR 391.62)
☐ Wearing hearing aid ☐ Accompanied by a Skill Performance Evaluation (SPE) Certificate ☐ (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

02/16/2025

Medical Examiner's Signature

Medical Examiner's Telephone Number

(305) 888-6959

Date Certificate Signed

02/16/2024

Medical Examiner's Name (please print or type)

Rosangel Santiago

☒ MD ☐ Physician Assistant ☐ Advanced Practice Nurse

☐ DO ☐ Chiropractor ☐ Other Practitioner (specify) _____

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

ACN493

Issuing State

FL

National Registry Number

5226647854

Driver's Signature

Driver's License Number

R362285731220

Issuing State/Province

FL

Driver's Address

Street Address: 12405 SW 10 ST

City: MIAMI

State/Province: FL

Zip Code: 33184

CLP/CDL Applicant/Holder

☒ Yes ☐ No



Search Medical Examiners

National Registry Number

Business Name

5226647854

First Name

Last Name

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[Previous Page](#)

1 of 1

[Next Page](#)

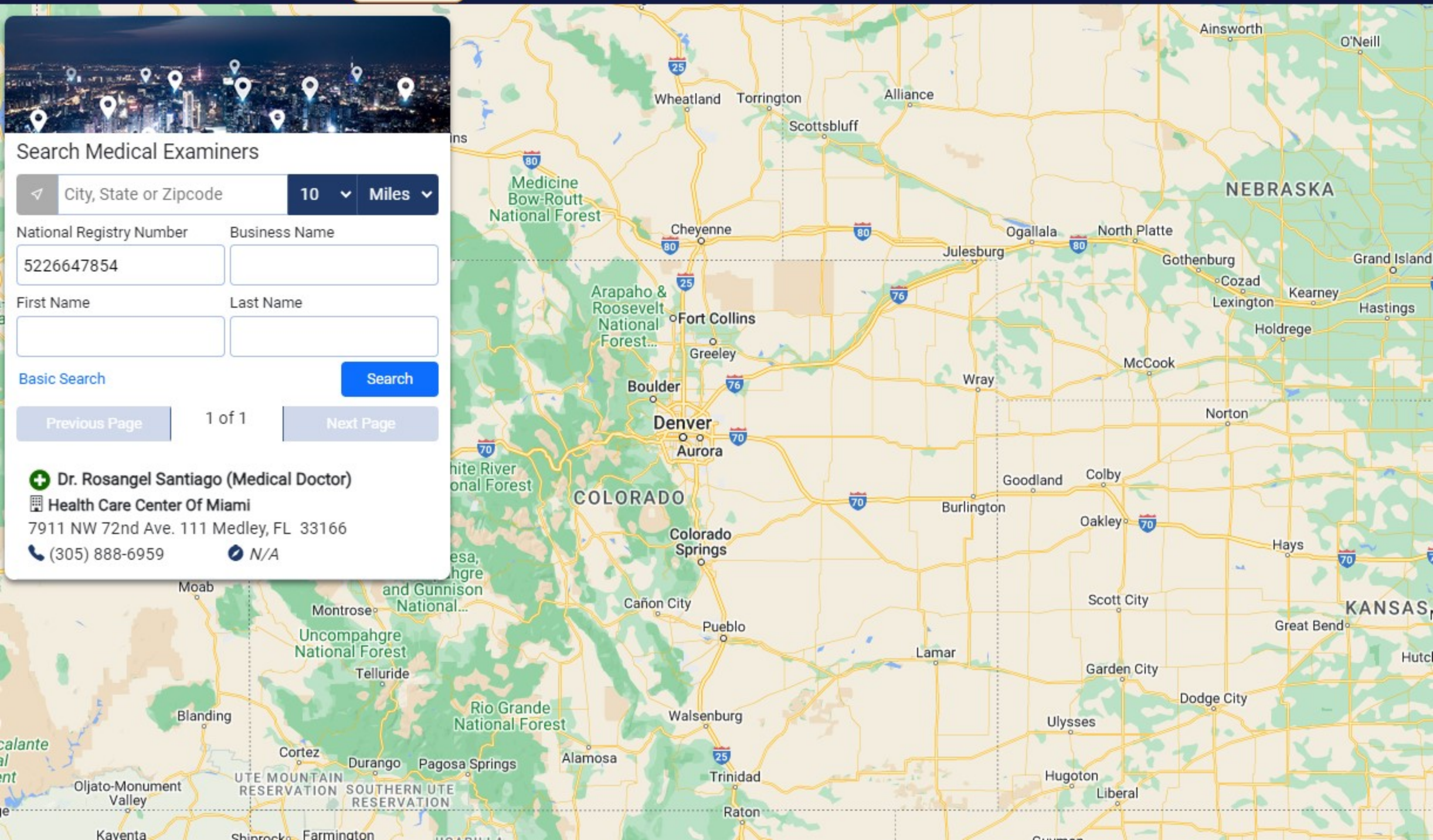
Dr. Rosangel Santiago (Medical Doctor)

Health Care Center Of Miami

7911 NW 72nd Ave. 111 Medley, FL 33166

(305) 888-6959

N/A



Query Detail

Query Overview

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

Query Result: Driver Not Prohibited

Query Status: Completed (5/6/2024 10:20:02)

Conducted By: RADOSLAV KOVACEVIC

Query Type: Pre-employment

Query Submitted: Manually

Driver Information

Name: GENARO RODRIGUEZ

Date of Birth: 4/2/1973

CDL/CLP ⓘ: US-FL-R362285731220

Consent Information

Requested: 5/6/2024 9:31:43

Recorded: 5/6/2024 10:20:02

Status: Provided

Query History

Created: 5/6/2024 9:31:43

Completed: 5/6/2024 10:20:02

Query Result: Driver Not Prohibited

LEARN MORE

 [The Return-to-Duty Process](#)

Open Violations

No Open Violations