

| US Department of Transportation<br>Federal Motor Carrier Safety Administration   |  | Medical Examiners Certificate<br>(for Commercial Driver Medical Certification)  |  | Form MCSA-5875 OMB No. 2126-0066<br>Expiration Date 12/31/2024 Rev. 1/5/2022   |  |
|--|--|---|--|--|--|
| I certify that I have Examined <u>Lisa</u> Name: <u>Bess</u><br>in accordance with (please check only one):<br><input checked="" type="radio"/> 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 OR<br><input type="radio"/> 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:<br><input type="checkbox"/> Wearing corrective lenses <input type="checkbox"/> Accompanied by a <input type="checkbox"/> waiver/exemption <input type="checkbox"/> Driving within a exempt intracity zone (49 CFR 391.62)<br><input type="checkbox"/> Wearing hearing aid <input type="checkbox"/> Accompanied by a Skill Performance Evaluation (SPE) Certificate <input type="checkbox"/> Qualified by operation of 49 CFR 391.64<br><input type="checkbox"/> Grandfathered from State requirements |  | First Name: <u>Elijah</u><br>Medical Examiner's Certificate Expiration Date: <u>10/17/2024</u>  |  | Medical Examiner's Telephone Number: (910) 303-2690 Date Certificate Signed: <u>10/17/2024</u>   |  |
| Medical Examiner's Signature: <u>[Signature]</u><br>Medical Examiner's Name: <u>Dr. Brian Twaddell</u><br>Medical Examiner's State License, Certificate, or Registration Number: <u>2347</u>   |  | OMD <input type="radio"/> Physician Assistant <input type="radio"/> Advanced Practice Nurse <input type="radio"/> Chiropractor <input type="radio"/> Other<br>Issuing State: <u>North Carolina</u> National Registry Number: <u>779477763</u> |  | Driver's License Number: <u>B200-216-8405-D</u> Issuing State: <u>FL</u><br>City: <u>Miami</u> State: <u>FL</u> Zip Code: <u>33157</u> |  |
| Driver's Signature: <u>[Signature]</u><br>Driver's Address: <u>11575 SW 215 St</u><br>Street Address:  |  | CLP/CSL Applicant/Holder <input checked="" type="radio"/> Yes <input type="radio"/> No  |  |  |  |

**FMCSA**

Federal Motor Carrier Safety Administration

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## Search Medical Examiners

National Registry Number

Business Name

First Name

Last Name

[Basic Search](#)[Search](#)[Previous Page](#)

1 of 1

[Next Page](#) **Dr. Robert Twaddell (Doctor Of Chiropractic)** **Fayetteville DOT Exams / Occ Med**

1332 Bragg Blvd \$95 CDL / DOT

Exams Fayetteville, NC 28301

(910) 303-2690

 N/A [Directions](#)

Bragg Rd

Fort Bragg Rd

W Dobbin Ave

Fo





 **Dr. Robert Twaddell**  
(Doctor Of Chiropractic)



[Email](#)



[Website](#)

**Practice Business Name**

Fayetteville DOT Exams / Occ Med

**Address**

1332 Bragg Blvd \$95 CDL / DOT  
Exams Fayetteville, NC 28301

**Hours of Operation**

830-300

**National Registry Number**

7764707923

**Certification Date**

09/21/2013

**Distance**

N/A

**Business Phone**

(910) 303-2690

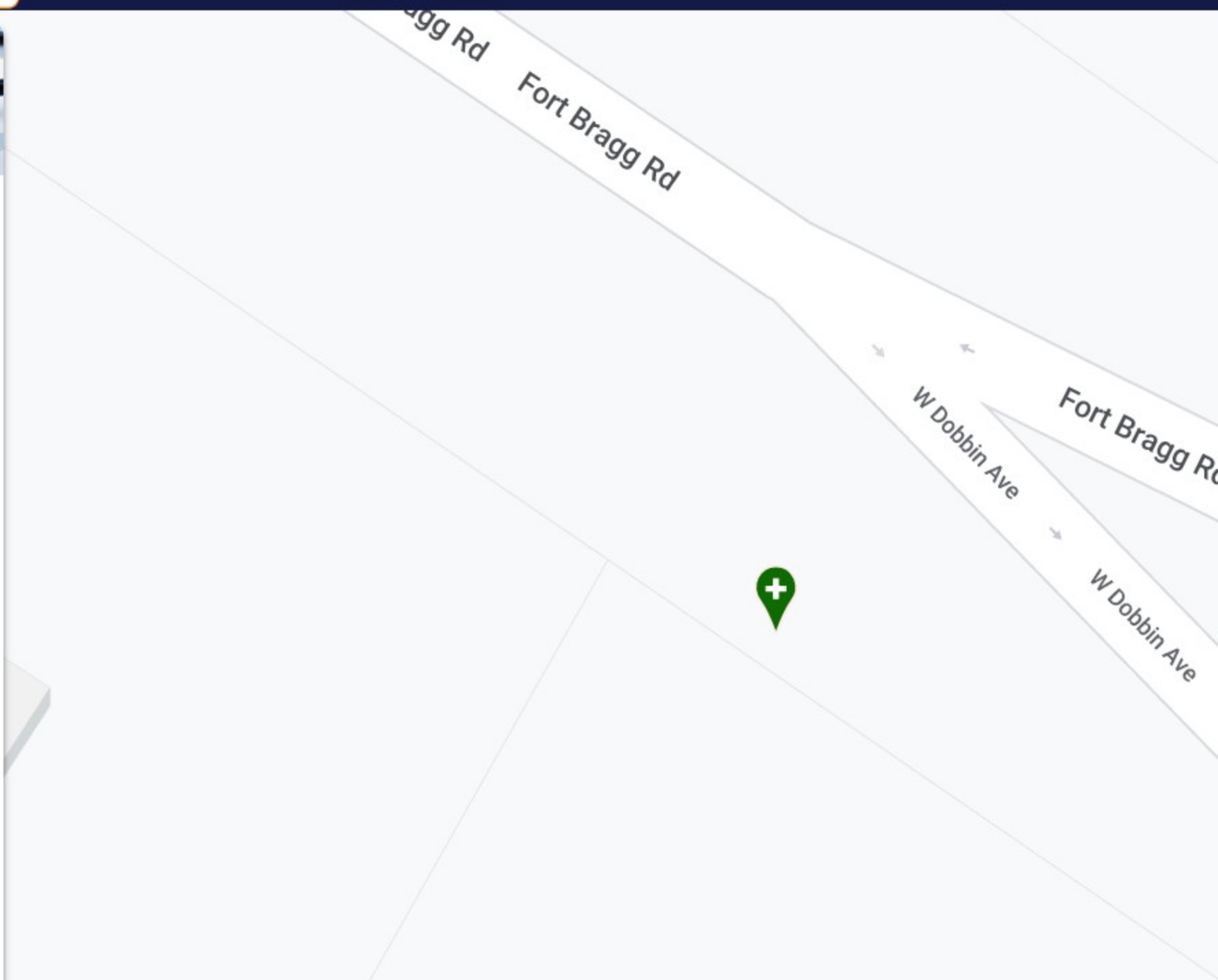
**Business Fax Number**

-

**Business Email**

doctor@ahhealthyback.com

Business Website



## Query Detail

### Query Overview

**Employer Conducting Query:** ZIGI FREIGHT INC (USDOT# 2828543)

**Query Result:** Driver Not Prohibited

**Query Status:** Completed (5/28/2024 11:09:19)

**Conducted By:** Teodora Nikolic | **Query Type:** Pre-employment | **Query Submitted:** Manually

#### Driver Information

**Name:** ELIJAH BESS

**Date of Birth:** 11/5/1986

**CDL/CLP ⓘ:** US-FL-B200216864050

#### Consent Information

**Requested:** 5/28/2024 10:31:58

**Recorded:** 5/28/2024 11:09:19

**Status:** Provided

#### Query History

**Created:** 5/28/2024 10:31:58

**Completed:** 5/28/2024 11:09:19

**Query Result:** Driver Not Prohibited

### LEARN MORE

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

### Open Violations

No Open Violations