



1

SAFETY PERFORMANCE HISTORY  
RECORDS REQUEST



- CONFIDENTIAL -

Company: M &amp; S TRANSPORT INC (DOT2569725) Phone: (630) 580-8537

Date: 06/03/24

Address: 765 RT 83 STE 112 BENSENVILLE, IL 60106 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.

  
Gonzalez Alexis (Jun 3, 2024 09:51 EDT)  
Kristina Milacic (Jun 3, 2024 09:52 EDT)

Applicant's Signature

Company representative

## Dear Personnel Manager

The person named herein has applied to this company for employment in a safety-sensitive position, Your finding the applicant as a past employer. Will you kindly reply to this inquiry respecting this applicant. As you will read waiver stated above, all liability of you and your company has been released by the applicant.

**PLEASE BE ADVISED!** You may reply by FAX +1 630 485 6980 or e-mail: [safety@royal3inc.com](mailto:safety@royal3inc.com).

Name of Applicant: ALEXIS GONZALEZ SSN: 590618303

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 : 02/07/2024 End Date : 02/11/2024☒ Company Driver ☐ Owner/Operator ☐ Other? \_\_\_\_\_Type of tractor operated: Scoti Type of trailer pulled: VanOther equipment operated: / Commodities operated: general commodityAccidents: ☐ Yes ☒ No If yes, please give the date and brief description of each accident: N/ATraffic 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: \_\_\_\_\_Rehab completed under direction of SAP/MRO? ☐ Yes ☒ No If yes, please give date: \_\_\_\_\_Any problems with bonding? Yes ☒ No If yes, please explain: \_\_\_\_\_Why did this employee leave your company? he left the company voluntarilyWould you re-employee this person? ☒ Yes ☐ No If no, please explain: \_\_\_\_\_Additional comments: ( Any problems with customer relations, supervision, or abuse of equipment? NOName/Title (of person providing the above information): Mary JanovicCompany: M&S TRANSPORT INCDate: 06/11/2024





1

SAFETY PERFORMANCE HISTORY  
RECORDS REQUEST

- CONFIDENTIAL -

**Company:** M & S TRANSPORT INC (DOT2569725) **Phone:** (630) 580-8537**Date:** 06/03/24**Address:** 765 RT 83 STE 112 BENSVILLE, IL 60106 **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.

  
Gonzalez Alexis (Jun 3, 2024 09:51 EDT)  
Kristina Milacic (Jun 3, 2024 09:52 EDT)

Applicant's Signature

Company representative

8YUf DYfgcbbY A UbU Yf

H Y dYfgcbbUa YX YfYb U Udd JYX hc H Jg Wda dUbmZcf Ya d'cna Ybh b U gUZ/magYbgHij Y d'cgHjcbZMci f ZbXb H Y Udd J WbhUg U dUghYa d'cnYf K J nci JbX mfyd mhc H Jg bei JmfygdYVJb H Jg Udd J Wbh 5g nci k J fYUX k Uij Yf gUHYX Uvcj YZU JUV JmcZnci UbX nci f Wda dUbm U gVYYb fY YUgYX VmH Y Udd J Wbt

**PLEASE BE ADVISED!** Mti a Umfyd nby FAX +1 630 485 6980 or e-mail: [safety@royal3inc.com](mailto:safety@royal3inc.com).

Name of Applicant: ALEXIS GONZALEZ SSN: 590618303

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 : \_\_\_\_\_ 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: \_\_\_\_\_Verified positive controlled substances test results? ☐ Yes ☐ No If yes, please give date: \_\_\_\_\_Refusals to be tested? ☐ Yes ☐ No If yes, please give date: \_\_\_\_\_Rehab completed under direction of SAP/MRO? ☐ Yes ☐ No If yes, please give date: \_\_\_\_\_

Any problems with bonding? Yes No If yes, please explain: \_\_\_\_\_

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: \_\_\_\_\_

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

**July 3, 2024**

RE: Employee Verification Requests for Gonzalez Alexis from NOVA FREIGHT LLC.

To whom it may concern:

As of June 3, 2024 I have made the following attempts to contact NOVA FREIGHT LLC in order to verify Gonzalez Alexis's employment there.

The first attempt was made on June 11, 2024 when I sent a request at [info@novafreightllc.net](mailto:info@novafreightllc.net) which was recommended by safety person when I reached out through phone to their office.

On June 17, 2024 I re-sent request completing the second attempt and on June 24, 2024 I have made a third and final attempt. A formal response from NOVA FREIGHT LLC was never received.

Sincerely,

Kristina Milacic

A handwritten signature in black ink, appearing to read 'KM', is positioned above a solid blue horizontal line.



Employment Verifications <ev@royal3inc.com>

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## Employment Verification for Gonzalez Alexis

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**Employment Verifications** <ev@royal3inc.com>  
To: info@novafreightllc.net

Mon, Jun 24, 2024 at 11:06 PM

Hello,

I am a safety officer from Royal3 INC company.

I am sending you this email to confirm Gonzalez Alexis'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](mailto:ev@royal3inc.com)



**03DQ Royal 3 Inc\_Gonzalez Alexis-4.pdf**  
894K





Employment Verifications <ev@royal3inc.com>

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## Employment Verification for Gonzalez Alexis

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**Employment Verifications** <ev@royal3inc.com>  
To: info@novafreightllc.net

Mon, Jun 17, 2024 at 1:42 PM

Hello,

I am a safety officer from Royal3 INC company.

I am sending you this email to confirm Gonzalez Alexis'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](mailto:ev@royal3inc.com)



**03DQ Royal 3 Inc\_Gonzalez Alexis-4.pdf**  
894K



Employment Verifications <ev@royal3inc.com>

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## Employment Verification for Gonzalez Alexis

---

**Employment Verifications** <ev@royal3inc.com>

Tue, Jun 11, 2024 at 12:00 AM

To: info@novafreightllc.net

Hello,

I am a safety officer from Royal3 INC company.

I am sending you this email to confirm Gonzalez Alexis'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

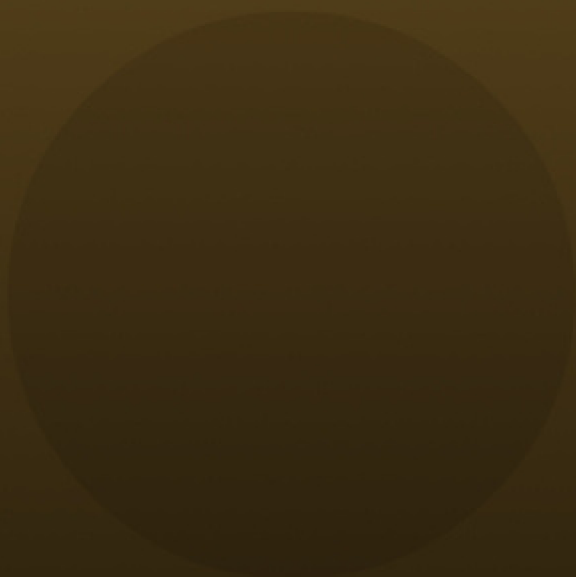
f. 630-485-6980

e. [ev@royal3inc.com](mailto:ev@royal3inc.com)



**03DQ Royal 3 Inc\_Gonzalez Alexis-4.pdf**

894K



NOVA FREIGHT LL



6.11.24.

Outgoing call

10:23 (56 sec)

From

(630) 566-2119 (me)

(708) 277-6633

Phone number



Create new contact

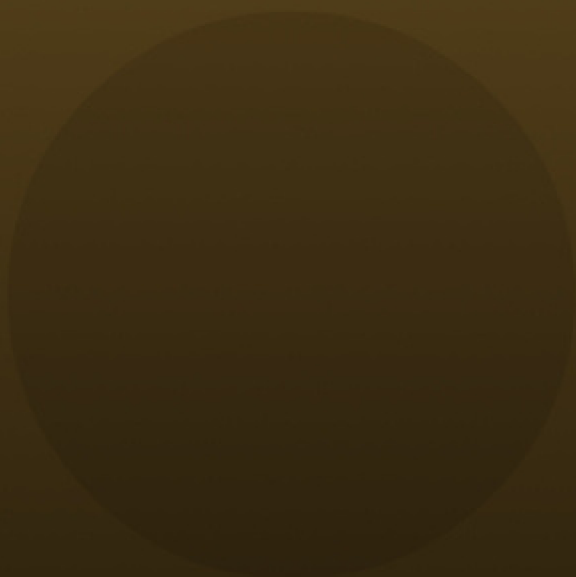


Add to existing contact



Block and report





NOVA FREIGHT LL



6.17.24.

Outgoing call

11:53 (49 sec)

From

(630) 566-2119 (me)

(708) 277-6633

Phone number



Create new contact

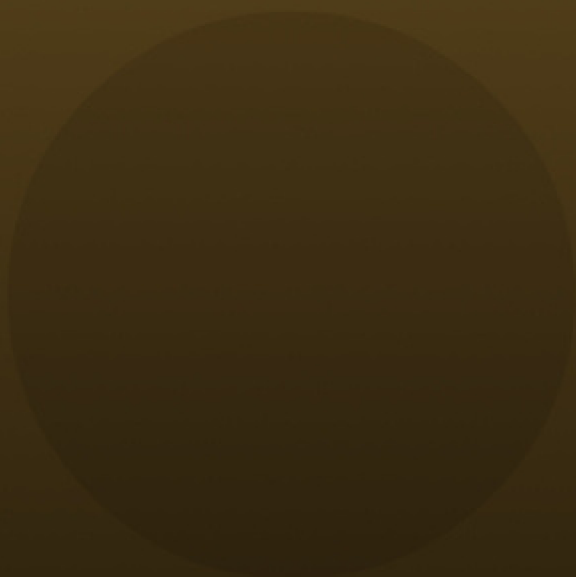


Add to existing contact



Block and report





NOVA FREIGHT LL



6.24.24.

Outgoing call

13:19 (51 sec)

From

(630) 566-2119 (me)

(708) 277-6633

Phone number



Create new contact



Add to existing contact



Block and report





2

SAFETY PERFORMANCE HISTORY  
RECORDS REQUEST

- CONFIDENTIAL -

**Company:** NOVA FREIGHT LLC (DOT3509638)**Phone:** (708) 277-6633**Date:** 06/03/24**Address:** 20325 COTTAGE GROVE AVE CHICAGO HEIGHTS, IL 60411 **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.

  
Gonzalez Alexis (Jun 3, 2024 09:51 EDT)

Applicant's Signature

  
Company representative

8YUf'DYfgcbby'A UbU[Yf

HAYdYfgcb'buA YX\YfY]b\UgUdd'JYX'hc'H]gWda dUbmZcf'Ya d'cna Ybh]b'UgUZ/magYbg]hij Y'dcg]h'cbZ'Mci f'Z]bX]b[ 'HAY  
Udd'JWbhUg'U'dUghYa d'cnyf'"K J'"nci \_]bX'mfYd'mhc'H]g]bei J'mfYgdYV]b[ 'H]gUdd'JWbh'5g'nci 'k J'"fYUX'k U]j Yf'gUHXY  
UVcj YZU'"JUV]J'mcZnci 'UbX'nci f'Wda dUbmUgVYYb f'Y'YUgYX Vm'h Y Udd'JWbt"

**PLEASE BE ADVISED!** Mti 'a UmfYd'mby FAX +1 630 485 6980 or e-mail: [safety@royal3inc.com](mailto:safety@royal3inc.com).

Name of Applicant: ALEXIS GONZALEZ SSN: 590618303

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 : \_\_\_\_\_ 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: \_\_\_\_\_Verified positive controlled substances test results? ☐ Yes ☐ No If yes, please give date: \_\_\_\_\_Refusals to be tested? ☐ Yes ☐ No If yes, please give date: \_\_\_\_\_Rehab completed under direction of SAP/MRO? ☐ Yes ☐ No If yes, please give date: \_\_\_\_\_

Any problems with bonding? Yes No If yes, please explain: \_\_\_\_\_

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: \_\_\_\_\_

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

**July 3, 2024**

RE: Employee Verification Requests for Gonzalez Alexis from GLOBAL LOGISTICS FREIGHT LLC.

To whom it may concern:

As of June 3, 2024 I have made the following attempts to contact GLOBAL LOGISTICS FREIGHT LLC in order to verify Gonzalez Alexis's employment there.

The first attempt was made on June 10, 2024 when I sent a request at [GLFAGENT@gmail.com](mailto:GLFAGENT@gmail.com) which was recommended by safety person when I reached out through phone to their office.

On June 17, 2024 I re-sent request completing the second attempt and on June 24, 2024 I have made a third and final attempt. A formal response from GLOBAL LOGISTICS FREIGHT LLC was never received.

Sincerely,

Kristina Milacic

A handwritten signature in black ink, appearing to read 'Kristina', is positioned above a solid blue horizontal line.



Employment Verifications <ev@royal3inc.com>

---

## Employment Verification for Gonzalez Alexis

---

**Employment Verifications** <ev@royal3inc.com>  
To: GLFAGENT@gmail.com

Mon, Jun 24, 2024 at 11:05 PM

Hello,

I am a safety officer from Royal3 INC company.

I am sending you this email to confirm Gonzalez Alexis'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](mailto:ev@royal3inc.com)



**03DQ Royal 3 Inc\_Gonzalez Alexis-5.pdf**  
894K





Employment Verifications <ev@royal3inc.com>

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## Employment Verification for Gonzalez Alexis

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**Employment Verifications** <ev@royal3inc.com>  
To: GLFAGENT@gmail.com

Mon, Jun 17, 2024 at 1:43 PM

Hello,

I am a safety officer from Royal3 INC company.

I am sending you this email to confirm Gonzalez Alexis'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](mailto:ev@royal3inc.com)



**03DQ Royal 3 Inc\_Gonzalez Alexis-5.pdf**  
894K



Employment Verifications <ev@royal3inc.com>

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## Employment Verification for Gonzalez Alexis

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**Employment Verifications** <ev@royal3inc.com>  
To: GLFAGENT@gmail.com

Mon, Jun 10, 2024 at 11:56 PM

Hello,

I am a safety officer from Royal3 INC company.

I am sending you this email to confirm Gonzalez Alexis'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

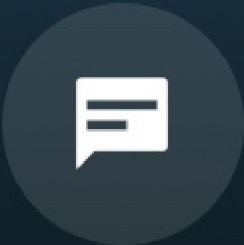
e. [ev@royal3inc.com](mailto:ev@royal3inc.com)



**03DQ Royal 3 Inc\_Gonzalez Alexis-5.pdf**  
894K



(305) 842-2934



6.11.24.

Outgoing call

10:12 (39 sec)

From

(630) 566-2119 (me)

(305) 842-2934

Phone number



Create new contact



Add to existing contact

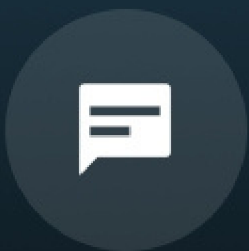


Block and report





(305) 842-2934



6.17.24.

Outgoing call

11:41 (43 sec)

From

(630) 566-2119 (me)

(305) 842-2934

Phone number



Create new contact



Add to existing contact

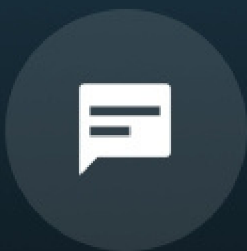


Block and report





(305) 842-2934



6.24.24.

Outgoing call

13:11 (49 sec)

From

(630) 566-2119 (me)

(305) 842-2934

Phone number



Create new contact



Add to existing contact



Block and report






3

SAFETY PERFORMANCE HISTORY  
RECORDS REQUEST

- CONFIDENTIAL -

**Company:** GLOBAL LOGISTICS FREIGHT LLC (DOT2582155) **Phone:** (305) 842-2934**Date:** 06/03/24**Address:** 6242 OLD SOUTEL CT JACKSONVILLE, FL 32219 **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.

  
Gonzalez Alexis (Jun 3, 2024 09:51 EDT)

Applicant's Signature

  
Company representative

8YUf DYfgcbby' A UbU[ Yf

H Y dYfgcb bUa YX\ YfY]b \ Ug Udd JYX hc H Jg Wda dUbmZcf Ya d'cna Ybh]b U gUZ/magYbg]hij Y d'cg]hcbZ Mti f Z]bX]b[ H Y Udd J]WbhUg U dUghYa d'cnYf"K J" nci \_]bX mifYd mhc H Jg]bei Jf mifYgdYV]b[ H Jg Udd J]Wbh 5g nci k J" fYUX k Uij Yf gUHXY Uvcj YZ U" JUV] JmcZnci UbX nci f Wda dUbm U g VYYb fY YUgYX VmH Y Udd J]Wbt"

**PLEASE BE ADVISED!** Mti a UmfYd mby FAX +1 630 485 6980 or e-mail: [safety@royal3inc.com](mailto:safety@royal3inc.com).

Name of Applicant: ALEXIS GONZALEZ SSN: 590618303

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 : \_\_\_\_\_ 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: \_\_\_\_\_Verified positive controlled substances test results? ☐ Yes ☐ No If yes, please give date: \_\_\_\_\_Refusals to be tested? ☐ Yes ☐ No If yes, please give date: \_\_\_\_\_Rehab completed under direction of SAP/MRO? ☐ Yes ☐ No If yes, please give date: \_\_\_\_\_

Any problems with bonding? Yes No If yes, please explain: \_\_\_\_\_

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: \_\_\_\_\_



The information below reflects the content of the FMCSA management information systems as of 07/02/2024. Carrier VMT Outdated.

To find out if this entity has a pending insurance cancellation, please [click here](#).

USDOT INFORMATION			
Entity Type:	CARRIER		
USDOT Status:	ACTIVE	Out of Service Date:	None
USDOT Number:	2540798	State Carrier ID Number:	
MCS-150 Form Date:	03/27/2023	MCS-150 Mileage (Year):	6,149,881 (2021)
OPERATING AUTHORITY INFORMATION			
Operating Authority Status:	NOT AUTHORIZED		
	*Please Note: NOT AUTHORIZED does not apply to Private or Intrastate operations. For Licensing and Insurance details <a href="#">click here</a> .		
MC/MX/FF Number(s):	MC-883965		
COMPANY INFORMATION			
Legal Name:	MERCATOR GLOBAL LOGISTICS LLC		
DBA Name:			
Physical Address:	1600 BUSSE RD UNIT B ELK GROVE VILLAGE, IL 60007		
Phone:	(847) 805-8384		
Mailing Address:	1600 BUSSE RD UNIT B ELK GROVE VILLAGE, IL 60007		
DUNS Number:	--		
Power Units:	1	Drivers:	1
Operation Classification:			
<input checked="" type="checkbox"/> Auth. For Hire	<input type="checkbox"/> Priv. Pass.(Non-business)	<input type="checkbox"/> State Gov't	
<input type="checkbox"/> Exempt For Hire	<input type="checkbox"/> Migrant	<input type="checkbox"/> Local Gov't	
<input type="checkbox"/> Private(Property)	<input type="checkbox"/> U.S. Mail	<input type="checkbox"/> Indian Nation	
<input type="checkbox"/> Priv. Pass. (Business)	<input type="checkbox"/> Fed. Gov't		
Carrier Operation:			
<input checked="" type="checkbox"/> Interstate	<input type="checkbox"/> Intrastate Only (HM)	<input type="checkbox"/> Intrastate Only (Non-HM)	
Cargo Carried:			
<input checked="" type="checkbox"/> General Freight	<input type="checkbox"/> Liquids/Gases	<input type="checkbox"/> Chemicals	
<input type="checkbox"/> Household Goods	<input type="checkbox"/> Intermodal Cont.	<input type="checkbox"/> Commodities Dry Bulk	
<input type="checkbox"/> Metal: sheets, coils, rolls	<input type="checkbox"/> Passengers	<input type="checkbox"/> Refrigerated Food	
<input type="checkbox"/> Motor Vehicles	<input type="checkbox"/> Oilfield Equipment	<input type="checkbox"/> Beverages	
<input type="checkbox"/> Drive/Tow away	<input type="checkbox"/> Livestock	<input type="checkbox"/> Paper Products	
<input type="checkbox"/> Logs, Poles, Beams, Lumber	<input type="checkbox"/> Grain, Feed, Hay	<input type="checkbox"/> Utilities	
<input type="checkbox"/> Building Materials	<input type="checkbox"/> Coal/Coke	<input type="checkbox"/> Agricultural/Farm Supplies	
<input type="checkbox"/> Mobile Homes	<input type="checkbox"/> Meat	<input type="checkbox"/> Construction	
<input type="checkbox"/> Machinery, Large Objects	<input type="checkbox"/> Garbage/Refuse	<input type="checkbox"/> Water Well	
<input type="checkbox"/> Fresh Produce	<input type="checkbox"/> US Mail		



4

SAFETY PERFORMANCE HISTORY  
RECORDS REQUEST

- CONFIDENTIAL -

**Company:** MERCATOR GLOBAL LOGISTICS LLC (DOT2540798) **Phone:** (847) 805-8384  
**Address:** 1600 BUSSE RD UNIT B ELK GROVE VILLAGE, IL 60007 **Fax:**

**Date:** 06/03/24

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.

  
Gonzalez Alexis (Jun 3, 2024 09:51 EDT)

Applicant's Signature

Company representative

8YUf DYfgcbbY A UbU Yf

H Y dYfgcb bUa YX \ YfY]b \ Ug Udd JYX hc H Jg Wda dUbmZcf Ya d'cna Ybh]b U gUZ/magYbg]hij Y d'cg]hcbZ Mti f Z]bX]b[ H Y  
Udd J]WbhUg U dUghYa d'cnYf"K J" nci \_]bX mifYd mhc H Jg]bei Jf mifYgdYV]b[ H Jg Udd J]Wbh 5g nci k J" fYUX k Uij Yf gUH YX  
UVcj YZ U" JUV J]mcZ nci UbX nci f Wda dUbm U g VYYb fY YUgYX VmH Y Udd J]Wbt"

**PLEASE BE ADVISED!** Mti a UmfYd nby FAX +1 630 485 6980 or e-mail: [safety@royal3inc.com](mailto:safety@royal3inc.com).

Name of Applicant: ALEXIS GONZALEZ SSN: 590618303

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 : \_\_\_\_\_ 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: \_\_\_\_\_Verified positive controlled substances test results? ☐ Yes ☐ No If yes, please give date: \_\_\_\_\_Refusals to be tested? ☐ Yes ☐ No If yes, please give date: \_\_\_\_\_Rehab completed under direction of SAP/MRO? ☐ Yes ☐ No If yes, please give date: \_\_\_\_\_

Any problems with bonding? Yes No If yes, please explain: \_\_\_\_\_

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: \_\_\_\_\_