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SAFETY PERFORMANCE HISTORY  
RECORDS REQUEST

- CONFIDENTIAL -

**Company:** VELOX TRANSPORT SOLUTIONS LLC (DOT2341009) **Phone:** (877) 214-2395**Date:** 08/12/24**Address:** 7500 NW 52ND ST STE 200 MIAMI, FL 33166-5513 **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.

  
Oliva Jorge Yasser (Aug 12, 2024 10:52 EDT)  
Kristina Milacic (Aug 12, 2024 10:53 EDT)

Applicant's Signature

Company representative

8YUf DYfgcbby A UbU Yf

H Y dYfgcb bUa YX YfYb U g Udd JYX hc H g Wda dUbmZcf Ya d'cna Ybh b U g UZ YmgYbgHij Y dcgHjcbZ Mti f Z bX b H Y Udd J Wbh Ug U dUgh Ya d'cnYf K J nci J bX mYd mhc H g bei J mYgdYV M b H g Udd J Wbh 5g nci k J fYUX k Uij Yf g UH X Uvcj YZ U JUV J mcz nci UbX nci f Wda dUbm Ug VYYb fY YUgYX VmH Y Udd J Wbt

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

Name of Applicant: Oliva Jorge Yasser SSN: 592556737

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 : 07/17/2023 End Date : 03/28/2024

☐ Company Driver ☐ Owner/Operator ☐ Other? TPD

Type of tractor operated: SLEEPER Type of trailer pulled: dryvan 53'

Other equipment operated: X Commodities operated: GENERAL FREIGHT

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? RESIGNATION

Would you re-employee this person? ☒ Yes ☐ No If no, please explain: \_\_\_\_\_

Additional comments: ( Any problems with customer relations, supervision, or abuse of equipment? X

Name/Title (of person providing the above information): Joel Cordova , Driver Recruiter

Company: Velox transport

Date: 028/12/2024





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Job Applying For: OTR Driver

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If No, please explain: \_\_\_\_\_

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☐ Company Driver ☐ Owner/Operator ☐ Other? \_\_\_\_\_

Type of tractor operated: \_\_\_\_\_ Type of trailer pulled: \_\_\_\_\_

Other equipment operated: \_\_\_\_\_ Commodities operated: \_\_\_\_\_

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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: \_\_\_\_\_