

Public Burden Statement

A Federal agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a current valid OMB Control Number. The OMB Control Number for this collection of information is 1570-0008. Public reporting burden for this collection of information is estimated to be approximately 1 hour per response, including the time for reviewing instructions, gathering the data needed, and completing and reviewing this collection of information. All responses to this collection of information are mandatory. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Information Collection Project Office, Federal Motor Carrier Safety Administration, MC-804, 1200 New Jersey Avenue, SE, Washington, DC 20590.



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: GONZALEZ** **First Name: HUMBERTO** in accordance with (please check only one):

- ☒ the Federal Motor Carrier Safety Regulations (49 CFR 391.41, 391.47) 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 391.63) (Federal)
☐ Wearing hearing aid ☐ Accompanied by a Skill Performance Evaluation (SPE) Certificate ☐ Qualified by operation of 49 CFR 391.64 (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:

09/25/2025

Medical Examiner's Signature

Medical Examiner's Telephone Number

(305) 642-7111

Date Certificate Signed

09/25/2023

Medical Examiner's Name (please print or type)

YULIET SUAREZ PRADO

☐ MD

☐ Physician Assistant

☒ Advanced Practice Nurse

☐ DO

☐ Chiropractor

☐ Other Practitioner (specify) _____

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

APRN 11010504

Issuing State

FL

National Registry Number

9157977636

Driver's Signature

Driver's License Number

A60548952

Issuing State/Province

VA

Driver's Address

Street Address: 3780 nw 22ave apt 1001

City: Miami

State/Province: FL

Zip Code: 33142

CLP/CDL Applicant/Holder

☒ Yes ☐ No



Search Medical Examiners

10 Miles

National Registry Number

Business Name

9157977636

First Name

Last Name

Basic Search

Search

Previous Page

1 of 1

Next Page

 **Miss. Yuliet Suarez Prado (Advanced Practice Registered Nurse)**

 **Josefina F. Tur + M.D. P.A.**

4100 N.W 9th St., #100 Miami, FL 33126

 (305) 642-7111

 N/A [Directions](#)



EXAMEN MEDICO
DE INMIGRACION /...



Miss. Yuliet Suarez Prado

(Advanced Practice Registered Nurse)



Email



Website

Practice Business Name

Josefina F. Tur + M.D. P.A.

Address

4100 N.W 9th St., #100 Miami, FL 33126

Hours of Operation

-

National Registry Number

9157977636

Certification Date

01/29/2022

Distance

N/A

Business Phone

(305) 642-7111

Business Fax Number

3056420530

Business Email

julysuarez88@gmail.com



EXAMEN MEDICO
DE INMIGRACION /...

Query Detail

Query Overview

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

Query Result: Driver Not Prohibited

Query Status: Completed (10/23/2024 11:39:37)

Conducted By: RADOSLAV KOVACEVIC

Query Type: Pre-employment

Query Submitted: Manually

Driver Information

Name: HUMBERTO GONZALEZ

Date of Birth: 2/27/1975

CDL/CLP ⓘ: US-FL-G524320750670

Consent Information

Requested: 10/23/2024 11:27:20

Recorded: 10/23/2024 11:39:37

Status: Provided

Query History

Created: 10/23/2024 11:27:20

Completed: 10/23/2024 11:39:37

Query Result: Driver Not Prohibited

LEARN MORE

 The Return-to-Duty Process

Open Violations

No Open Violations