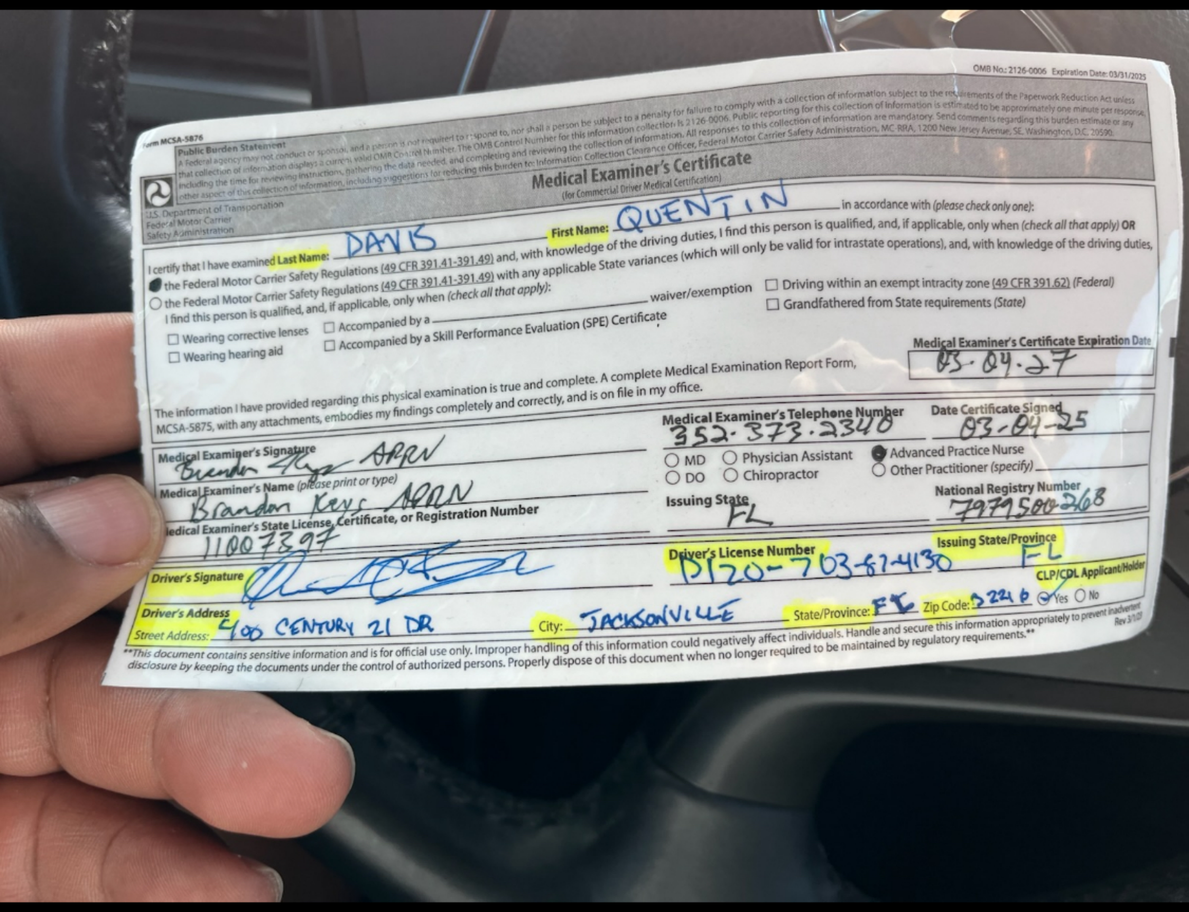

Form MCSA-5876

OMB No.: 2126-0006 Expiration Date: 03/31/2025

Public Burden Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. The OMB Control Number for this information collection is 2126-0006. Public reporting for this collection of information is estimated to be approximately one minute per response, including the time for reviewing instructions, gathering the data needed, and completing and reviewing the 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 Clearance Officer, Federal Motor Carrier Safety Administration, MC-RRA, 1200 New Jersey Avenue, SE, Washington, D.C. 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:** DAVIS **First Name:** QUENTIN 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 ☐ Wearing hearing aid ☐ Accompanied by a _____ waiver/exemption ☐ Accompanied by a Skill Performance Evaluation (SPE) Certificate ☐ Driving within an exempt intracity zone (49 CFR 391.62) *(Federal)* ☐ Grandfathered from State requirements *(State)*

Medical Examiner's Certificate Expiration Date: 03.04.27

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 Signature Brandon Keys APRN

Medical Examiner's Name *(please print or type)* Brandon Keys APRN

Medical Examiner's Telephone Number 352.373.2340

Date Certificate Signed 03.04.25

○ MD ○ DO ○ Physician Assistant ○ Chiropractor ● Advanced Practice Nurse ○ Other Practitioner *(specify)* _____

Medical Examiner's State License, Certificate, or Registration Number 1100797 **Issuing State** FL **National Registry Number** 7979500268

Driver's Signature [signature] **Driver's License Number** D120-703-67-413-0 **Issuing State/Province** FL **CLP/CDL Applicant/Holder** ● Yes ○ No

Driver's Address *Street Address:* 400 CENTURY 21 DR **City:** JACKSONVILLE **State/Province:** FL **Zip Code:** 32246

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Rev 3/1/21

Search Medical Examiners

City, State or Zipcode | 10 | Miles

National Registry Number: 7979500268

Business Name:

First Name:

Last Name:

Basic Search | Search

Previous Page | 1 of 1 | Next Page

Dr. Brandon Keys (Nurse Practitioner)
HCA Lake City Hospital
340 NW Commerce Drive Lake City, FL 32055
(386) 719-9000 *N/A* Directions

Dr. Brandon Keys

(Nurse Practitioner)

Email Website

Practice Business Name
HCA Lake City Hospital

Address
340 NW Commerce Drive Lake City, FL 32055

Hours of Operation
-

National Registry Number
7979500268

Certification Date
10/07/2021

Distance
N/A

Business Phone
(386) 719-9000

Business Fax Number
-

Business Email
rolando.dominguezmustafa@hcahealthcare.com

Query Detail

Query Overview

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

Query Result: Driver Not Prohibited

Query Status: Completed (6/23/2025 15:15:18)

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

Driver Information

Name: QUENTIN DAVIS
Date of Birth: 11/13/1987
CDL/CLP: US-FL-D120703874130

Consent Information

Requested: 6/18/2025 8:49:20
Recorded: 6/23/2025 15:15:18
Status: Provided

Query History

Created: 6/18/2025 8:49:20
Completed: 6/23/2025 15:15:18
Query Result: Driver Not Prohibited

Open Violations

No Open Violations

LEARN MORE

- The Return-to-Duty Process