



1

SAFETY PERFORMANCE HISTORY
RECORDS REQUEST

- CONFIDENTIAL -

Company: BRZ (USDOT 3119062)

Phone: (708)303-5150

Date: 03/13/24

Address: 8225 Leclair Ave Burbank, IL 60459

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.

HERNANDEZ GARCIA, RENE RANGEL (Mar 13, 2024 07:25 PDT)

Kristina Milacic (Mar 13, 2024 11:09 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 J]bX mfyd mhc H Jg]bei JfmfygdYV]b H Jg Udd J]Wbh' 5g nci k J' fYUX k Uij Yf gUHXY Uvcj YZ U' JUV J]mcZnci UbX nci f Wda dUbm U g VYYb fY YUgYX VmH Y Udd J]Wbt"

PLEASE BE ADVISED! Mti a Unfyd nby FAX +1 630 485 6980 or e-mail: safety@royal3inc.com.

Name of Applicant: Rene Rangel Hernandez Garcia SSN: 775998946

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 : 02/05/2020 End Date : 12/05/2020

☒ Company Driver ☐ Owner/Operator ☐ Other? _____

Type of tractor operated: Semi truck Type of trailer pulled: Dry Van

Other equipment operated: n/a 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? _____

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): Sofia M

Company: Riki Transportation Inc dba BRZ

Date: 03/13/2024



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Name of Applicant: Rene Rangel Hernandez Garcia SSN: 775998946

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: _____



2

SAFETY PERFORMANCE HISTORY
RECORDS REQUEST

- CONFIDENTIAL -

Company: ROYAL 3 (USDOT 2828543)

Phone: (630)485-7370

Date: 03/13/24

Address: 6850 W 63rd, Chicago, IL 60638

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.

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Kristina Milacic (Mar 13, 2024 11:09 EDT)

Applicant's Signature

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Name of Applicant: Rene Rangel Hernandez Garcia SSN: 775998946

Job Applying For: OTR Driver

1. 06/04/2020	to 12/05/2022 - dismissed
2. 06/10/2021	01/28/2022 - vacation +30 days
3. 03/08/2022	11/28/2022 - didn't have a return date
4. 03/23/2023	06/01/2023 - +30 days' vacation
5. 06/07/2023	08/02/2023 - private issues
6. 10/11/2023	End Date : 12/29/2023 - didn't have a return date

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 :

6.10/11/2023

End Date :

12/29/2023 - didn't have a return date

☒ Company Driver ☐ Owner/Operator ☐ Other? _____Type of tractor operated: Semi truck Type of trailer pulled: Dry VanOther equipment operated: n/a Commodities operated: General freightAccidents: ☐ 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): Sofia MCompany: Zigi Freight dba Royal 3 Inc.Date: 03/13/2024



2

SAFETY PERFORMANCE HISTORY
RECORDS REQUEST

- CONFIDENTIAL -

Company: ROYAL 3 (USDOT 2828543)**Phone:** (630)485-7370**Date:** 03/13/24**Address:** 6850 W 63rd, Chicago, IL 60638**Fax:**

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Applicant's Signature

Company representative

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H Y dYfgcb bUa YX YfY b U g Udd JYX hc H g Wda dUbmZcf Ya d'cna Ybh b U g UZ YmgYbgHij Y d'cgH jcbZ Mti f Z bX b H Y Udd J Wbh Ug U dUgh Ya d'cnYf K J nci J bX mfyd mhc H g bei J mfygdYmJb 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

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Name of Applicant: Rene Rangel Hernandez Garcia SSN: 775998946

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: _____