

Print

Request / Response Report

Response Tracking ID: (None)

Request #: 43580341

Maybach International Group Inc.

Provided By: **Bianca Eric**

Title: **(N/A)**

Address: **125 windsor dr ste 116**

City / State / Zip: **Oak Brook, IL 60523**

Email: **safety@maybachglobal.com**

Phone: **312-546-7557**

Fax:

Items Requested: **EMP**

Questions about this report?

Request Refused

Reason: **Refused - Not my Driver**

Description: **Did not drive under our authority.**

Tenstreet, 120 W. 3rd Street Tulsa, OK 74103.

Drivers: for questions about this report, contact the Tenstreet Consumer Service Department at 877-219-9283, Option 1, then 1 or email:

drivers@tenstreet.com



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SAFETY PERFORMANCE HISTORY
RECORDS REQUEST

- CONFIDENTIAL -

Company: MAYBACH INTERNATIONAL GROUP LLC (DOT2487790) **Phone:** (312) 546-7557**Date:** 09/21/23**Address:** 5125 W 123RD ST ALSIP, IL 60803**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.

Steevenson Oxilas (Sep 21, 2023 16:04 EDT)

Kristina Milacic (Sep 21, 2023 16:15 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]Mbh Ug U dUgh Ya d'cnYf"K J" nci _]bX' mYfYd' m'hc H Jg]bei Jf mYfYgdYV]b[H Jg Udd' J]Mbh" 5g'nci 'k J" fYUX'k U]j Yf gUH YX UVcj YZU"" JUV] JmicZnci 'UbX'nci f Wda dUbm\ Ug VYYb fY YUgYX Vmih Y Udd' J]Mbt"

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

Name of Applicant: Steevenson Oxilas

SSN: 007639866

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: _____

Request / Response Report

Response Tracking ID: 1592411

Request #: 43580342

Covenant Transport

Provided By: **Robert Path**
 Title: **(N/A)**
 Address: **400 Birmingham**
 City / State / Zip: **Chattanooga, TN 37419**
 Email: **DGrayson@covenantlogistics.com**
BBixler@covenantlogistics.com
 Phone: **423-463-3150**
 Fax: **423-825-7609**
 Items Requested: **EMP**

Questions about this report?

Requested Subject Information

Denotes a value not equal to the Provided value**Stee Oxilas**

SSN: **xxx-xx-9866**
 DOB: **04-02-1992**

Date Range Requested: **05-2022 to 01-2023**

Provided Subject Information

Denotes a value not equal to original Requested value**Steevenson Oxilas**

SSN: **xxx-xx-9866**
 DOB: **04-02-1992**

Date Range Provided: **08-2022 to 11-2022**

Original Request Information

Provided Information

Position Held
Reason For Leaving
Driver Class
Driver Type
Was the driver Terminated?
Was the driver subject to FMCSRs while employed?
Was the driver's job designated as a safety sensitive function in DOT regulated mode subject to Drug and Alcohol testing per 49 CFR Part 40?
Areas Driven
Equipment Driven
Trailer Driven
Loads Hauled

Position Held	Driver
Reason For Leaving	Resigned
Driver Class	Company
Driver Type	Team
Was the driver Terminated?	No
Eligible for Rehire?	Yes
Was the driver subject to FMCSRs while employed?	Yes
Was the driver's job designated as a safety sensitive function in DOT regulated mode subject to Drug and Alcohol testing per 49 CFR Part 40?	Yes
Full Time / Part Time	Full Time
Areas Driven	OTR
Equipment Driven	Conventional Tractor
Trailer Driven	Van
Loads Hauled	
Miles per week	
Number of States Driven	48
Trailer Length	53

Activity Log

10-02-2023 11:12 AM - Robert Path (Covenant Transport)

Response added. Request #43580342 status set to "Submitted".

10-01-2023 02:53 PM - Zigi Stamenkovic

Request sent under order #18691502 via **Network** method.

Tenstreet, 120 W. 3rd Street Tulsa, OK 74103.

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SAFETY PERFORMANCE HISTORY
RECORDS REQUEST

- CONFIDENTIAL -

Company: COVENANT TRANSPORT INC (DOT273818) **Phone:** (423) 821-1212**Date:** 09/21/23**Address:** 400 BIRMINGHAM HIGHWAY CHATTANOOGA, TN 37419 **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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PLEASE BE ADVISED! Mti a Unfyd nby FAX +1 630 485 6980 or e-mail: safety@rtbrz.com.

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Date: _____