Print

Set This Request Complete

Request #: 44012640

#### Request / Response Report

Top Notch Truckers, Inc

Provided By: Diliara Saifullina

Title: (N/A)

Address: 113 Portage Trail Suite E
City / State / Zip: Cuyahoga Falls, OH 44221

Email: tati@tntruckers.com

Phone: **689-500-4333** 

Fax:

Items Requested: EMP

### Questions about this report?

#### **Requested Subject Information**

Denotes a value not equal to the Provided value

**Reginal Chelerus** 

SSN: xxx-xx-5610 DOB: 12-02-1978 Date Range Requested: 06-2023 to 10-2023

#### **Provided Subject Information**

Denotes a value not equal to original Requested value

Reginal Cherelus

SSN: xxx-xx-5610 DOB: 12-02-1978 Date Range Provided: 06-2023 to 08-2023

#### **Original Request Information**

Provided Information

Response Tracking ID: (None)

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

1 TOVIGEG IIIIOTIIIGGOTI		
Position Held	Independent contractor	
Reason For Leaving	Terminated	
Driver Class	Company	
Driver Type	Team	
Was the driver Terminated?	Yes	
Termination Reason: arguing with everyone at the company, and not following company rules, terminated due to misbehavior		
Eligible for Rehire?	No	

Eligible for Rehire? No
Was the driver subject to FMCSRs Yes
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?	
Full Time / Part Time	Full Time
Areas Driven	OTR
Equipment Driven	Tractor-Trailer
Trailer Driven	Van
Loads Hauled	
Miles per week	
Number of States Driven	48

	_
Activity Log	
11-09-2023 05:54 PM - Diliara Saifullina (Top	Notch Truckers, Inc)
Response added. Request #44012640 statu	s set to "Submitted".
11-09-2023 04:03 PM - Zigi Stamenkovic	
Request Re-sent via Network method	
11-06-2023 06:32 AM - Zigi Stamenkovic	
Request Re-sent via Network method	
10-30-2023 09:01 AM - Zigi Stamenkovic	
Request Re-sent via Network method	
10-25-2023 05:32 AM - Zigi Stamenkovic	

Trailer Length

53

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: <a href="mailto:drivers@tenstreet.com">drivers@tenstreet.com</a>

Request sent under order #18851057 via Network method.



### SAFETY PERFORMANCE HISTORY RECORDS REQUEST

#### - CONFIDENTIAL -

Date: 10/11/23

Company: TOP NOTCH TRUCKERS INC (DOT: 3440818) Phone: 6895004354

Address: 113 PORTAGE TRL STE E CUYAHOGA FLS, OH 44221 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.

1

Reginal cherelus (Oct 11, 2023 14:52 EDT)	Sara Todorovil (Uc	t 11, 2023 15:37 EDT)
Applicant's Signature	Company repre	sentative
Dear Personnel Manager The person named herein has applied to this com applicant as a past employer. Will you kindly repl above, all liability of you and your company has b PLEASE BE ADVISED! You may reply by FAX +1 6	ly to this inquiry respecting this a been released by the applicant.	pplicant. As you will read waiver stated
Name of Applicant: Reginal Chelerus	ssn: 198785610	Job Applying For: OTR Driver
Did the Applicant work for you as a driver: Yes If No, please explain:	No	
If employed as a driver, please answer the following:  Company Driver Owner/Operator Other?	Start Date :	
Type of tractor operated:	Type of trailer pulled:	
Other equipment operated:C	Commodities operated:	
Accidents: Yes No If yes, please give the d	ate and brief description of each acci	dent:
Traffic Violations: Yes No If yes, please list	st all including the date and type of vi	olation:
INQUIRY FOR ALCOHOL AND CONTROLLED SUBS	TANCES INFORMATION	
Alcohol tests with a result of 0.04 or greater?	Yes No If yes, please give d	ate:
Verified positive controlled substances test results?	Yes No If yes, please give d	ate:
Refusals to be tested?	Yes No If yes, please give da	ate:
Rehab completed under direction of SAP/MRO?	Yes No If yes, please give d	ate:
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: \_\_\_\_ Royal3 Inc.

### Zigi Freight Inc. dba Royal 3, Inc. 6850 W. 63<sup>rd</sup> St. Chicago, IL 60638

#### November 11, 2023

RE: Employee Verification Requests for Reginal Chelerus from HILL BILLY TRUCKING LLC.

To whom it may concern:

As of October 11, 2023 I have made the following attempts to contact HILL BILLY TRUCKING LLC in order to verify Reginal Chelerus's employment there.

The first attempt was made on October 25, 2023 when I sent a request at <u>SAFETY@hillbillycarrier.com</u> which was recommended by safety person when I reached out through phone to their office.

On October 30, 2023 I re-sent request completing the second attempt and on November 6, 2023 I have made a third and final attempt. A formal response from HILL BILLY TRUCKING LLC you was never received.

Sincerely,

Sara Todorovic





### **Employment Verification for Reginal Chelerus**

**Employment Verifications** <ev@royal3inc.com> To: SAFETY@hillbillycarrier.com

Mon, Nov 6, 2023 at 1:34 PM

Hello.

I am a safety officer from Royal3 INC company.
I am sending you this email to confirm Reginal Chelerus's employment with your company.
Please find the attached form, and send it back to me at your earliest convenience.
Thank you!

Kind Regards, Sofia HR Department Zigi Freight dba Royal 3 Inc. 6850 W. 63rd St. Chicago, IL 60638 p. 630-485-7370 f. 630-485-6980 e. ev@royal3inc.com

03DQ Royal 3\_Cherelus Reginal-4.pdf



### **Employment Verification for Reginal Chelerus**

**Employment Verifications** <ev@royal3inc.com> To: SAFETY@hillbillycarrier.com

Mon, Oct 30, 2023 at 2:59 PM

Hello.

I am a safety officer from Royal3 INC company.
I am sending you this email to confirm Reginal Chelerus's employment with your company.
Please find the attached form, and send it back to me at your earliest convenience.
Thank you!

Kind Regards, Sofia HR Department Zigi Freight dba Royal 3 Inc. 6850 W. 63rd St. Chicago, IL 60638 p. 630-485-7370 f. 630-485-6980 e. ev@royal3inc.com

03DQ Royal 3\_Cherelus Reginal-4.pdf



#### Employment Verifications <ev@royal3inc.com>

### **Employment Verification for Reginal Chelerus**

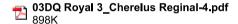
1 message

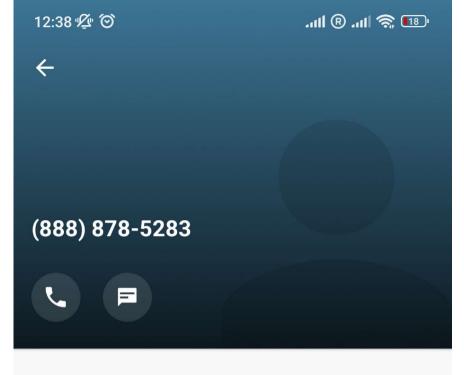
Employment Verifications <ev@royal3inc.com> To: SAFETY@hillbillycarrier.com Wed, Oct 25, 2023 at 12:49 PM

Hello,

I am a safety officer from Royal3 INC company.
I am sending you this email to confirm Reginal Chelerus's employment with your company.
Please find the attached form, and send it back to me at your earliest convenience.
Thank you!

Kind Regards, Sofia HR Department Zigi Freight dba Royal 3 Inc. 6850 W. 63rd St. Chicago, IL 60638 p. 630-485-7370 f. 630-485-6980 e. ev@royal3inc.com





10.31.23.

# Outgoing call

13:27 (48 sec)

# From

(630) 566-2119 (me)

(888) 878-5283

Phone number

Create new contact

Add to existing contact





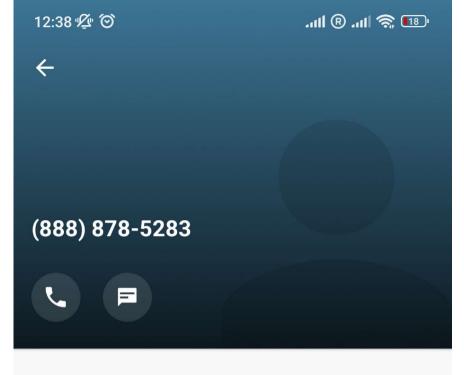












10.27.23.

# Outgoing call

14:16 (51 sec)

# From

(630) 566-2119 (me)

(888) 878-5283 Phone number

-





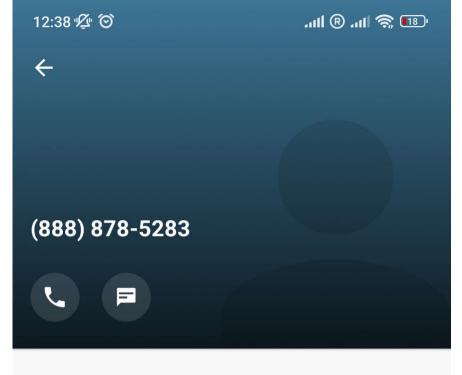
Create new contact



Add to existing contact







10.25.23.

# Outgoing call

12:56 (43 sec)

# From

(630) 566-2119 (me)

(888) 878-5283

Phone number

Create new contact

Add to existing contact

















# SAFETY PERFORMANCE HISTORY RECORDS REQUEST

#### - CONFIDENTIAL -

Job Applying For: OTR Driver

Company: HILL BILLY TRUCKING LLC (DOT: 3533973) Phone: 2179530678 Date: 10/11/23

2

Address: 100 E CAMPUS VIEW BLVD STE 250 COLUMBUS, OH 43235 Fax:

Reginal Chelerus

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.

A 1: 11 0: 1	
Reginal cherelus (Oct 11, 2023 14:52 EDT)	Sara Todorovi (Oct 11, 2023 15:37 EDT)

Applicant's Signature

Name of Applicant:

Company representative

#### Dear Personnel Manager

The person named herein has applied to this company for employment in a safety-sensitive position, Your finding the applicant as a past employer. Will you kindly reply to this inquiry respecting this applicant. As you will read waiver stated above, all liability of you and your company has been released by the applicant.

PLEASE BE ADVISED! You may reply by FAX +1 630 485 6980 or e-mail: safety@royal3inc.com.

SSN: 198785610

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?
Refusals to be tested?
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?
Additional comments: ( Any problems with customer relations, supervision, or abuse of equipment?
Name/Title (of person providing the above information):
Company:
Date:

Royal3 Inc.

Print

Set This Request Complete

Request #: 44012651

#### Request / Response Report

Zero Max Inc

Provided By: Khusnora Makhkamova

Title: (N/A)

Address: 4255 Westbrook Dr #208

City / State / Zip: Aurora, IL 60504

Email: safety@zeromaxinc.com

708-654-4626 Phone:

Fax:

Items Requested: EMP

# Questions about this report?

#### Requested Subject Information

Denotes a value not equal to the Provided value

**Reginal Chelerus** 

SSN: xxx-xx-5610 DOB: 12-02-1978

Date Range Requested: 06-2022 to 02-2023

#### **Provided Subject Information**

Denotes a value not equal to original Requested value

DRIVER

INVOLUNTARY

Lease Purchase

**Reginal Cherelus** Date Range Provided: 05-2022 to 11-2022

SSN: xxx-xx-5610 DOB: 12-02-1978

Position Held

Trailer Driven

Loads Hauled

#### Original Request Information

×
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

#### **Provided Information**

Reason For Leaving

Position Held

**Driver Class** 

Response Tracking ID: (None)

Driver Type	Team
Was the driver Terminated?	Yes
Termination Reason: The driver many times refused to reason that the rates of the loads they would want it to be. Moreove cooperate with dispatch team.	are not as high as
Eligible for Rehire?	No
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	Tractor-Trailer
Trailer Driven	Van
Loads Hauled	GENERAL COMMODITY
Miles per week	N/A
Number of States Driven	48

-	Trailer Length	53	
- 1	Trailer Length		

#### **Activity Log**

10-25-2023 12:19 PM - Khusnora Makhkamova (Zero Max Inc)

Response added. Request #44012651 status set to "Submitted".

10-25-2023 05:34 AM - Zigi Stamenkovic

Request sent under order #18851061 via Network method.

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: <a href="mailto:drivers@tenstreet.com">drivers@tenstreet.com</a>



### SAFETY PERFORMANCE HISTORY RECORDS REQUEST

#### - CONFIDENTIAL -

**Company:** ZERO MAX INC (2979800) **Phone:** 6304237227 **Date:** 10/11/23

3

Address: 1540 E DUNDEE RD STE 220 PALATINE, IL 60074 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.

from any and all liable type as a result of providing the		
lh d	_	<u>87                                    </u>
Reginal cherelus (Oct 11, 2023 14:52 EDT)	Sa	ra Todorovi (Oct 11, 2023 15:37 EDT)
Applicant's Signature	Com	pany representative
Dear Personnel Manager The person named herein has applied to this co- applicant as a past employer. Will you kindly re- above, all liability of you and your company has <u>PLEASE BE ADVISED!</u> You may reply by FAX +1	ply to this inquiry respect been released by the ap	ting this applicant. As you will read waiver stated plicant.
Name of Applicant: Reginal Chelerus	SSN: 198785610	Job Applying For: OTR Driver
Did the Applicant work for you as a driver: Yes If No, please explain:	No	
If employed as a driver, please answer the following:	Start Date :	End Date :
Company Driver Owner/Operator Other	r?	
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	f each accident:
Traffic Violations: Yes No If yes, please	list all including the date and	d type of violation:
INQUIRY FOR ALCOHOL AND CONTROLLED SUB	STANCES INFORMATION	ı
Alcohol tests with a result of 0.04 or greater?	Yes No If yes, ple	ease give date:
Verified positive controlled substances test results? $\Box$	Yes No If yes, ple	ease give date:
Refusals to be tested?	Yes No If yes, ple	ease give date:
Rehab completed under direction of SAP/MRO?	Yes No If yes, ple	ease give date:
Any problems with bonding? Yes No If ye		
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 r	elations, supervision, or abu	se of equipment?
	n):	

Royal3 Inc.

Date: \_\_\_\_

Company:



Dates of employment: 11/2021 -04/2022

DOT Employment Verification	Position: OTR Driver		
	Reason for leaving: Resigned		
Driver's name: Reginal Chelerus	Class: Owner operator		
SSN: xxx-xx-5610	Eligible for rehire: Upon review		
	Equipment operated: Dry van		
Accidents:			
N/A			
VOE provided by: Sara Marinkovic	Date: 10/30/2023		
Signature: 5M			



### SAFETY PERFORMANCE HISTORY RECORDS REQUEST

#### - CONFIDENTIAL -

Company: AAA FREIGHT INC (2028041) Phone: 6304139534 Date: 10/11/23

Address: 17201 STATE STREET SOUTH HOLLAND, IL 60473 Fax:

elus (Oct 11, 2023 14:52 EDT)

Royal3 Inc.

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.

Applicant's Signature		Company representative				
applicant as a past er above, all liability of	erein has applied to this c	eply to this inqu is been released	iry respecting th I by the applicant			
Name of Applicant:	Reginal Chelerus	SSN: 19878	35610	Job Applying For: OTR Drive	r	
Did the Applicant work f If No, please explain:	•	No		_		
If employed as a driver, please answer the following: Start Date :				End Date :	_	
Type of tractor operat	ed:	Type of trailer	pulled:			
Other equipment operat	red:	_ Commodities op	perated:			
Accidents: Yes	No If yes, please give th	e date and brief d	escription of each	accident:		
Traffic Violations: Ye	es No If yes, pleas	e list all including	the date and type of	of violation:		
INQUIRY FOR ALCOH	OL AND CONTROLLED SU	BSTANCES INF	ORMATION			
Alcohol tests with a resu	ılt of 0.04 or greater?	Yes No	If yes, please giv	e date:		
erified positive controlled substances test results? Yes No If yes, please give date:						
Refusals to be tested?	efusals to be tested? Yes No If yes, please give date:					
Rehab completed under	lehab completed under direction of SAP/MRO? Yes No If yes, please give date:					
Any problems with bond	ling? Yes No If y	es, please explair	:			
Why did this employee le	eave your company?					
Would you re-employee	this person? Yes N	lo If no, please	e explain:			
Additional comments: (	Any problems with customer	relations, supervi	sion, or abuse of ed	juipment?		
	roviding the above information	•	_			
Date						



### SAFETY PERFORMANCE HISTORY RECORDS REQUEST

#### - CONFIDENTIAL -

**Company:** DIAMOND TRUCKING 1 LLC (DOT: 3011846) **Phone:** 7042530296 **Date:** 10/11/23

5

Address: 2225 DR MARTIN LUTHER KING JR ST INDIANAPOLIS, IN 46208 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.

Reginal cherelus (Oct 11, 2023 14:52 EDT)	Sara Todorovi (Oct 11, 2023 15:37 EDT)			
Applicant's Signature	Company representative			
Name of Applicant: Reginal Chelerus SSA	N: 198785610 Job Applying For: OTR Driver			
Did the Applicant work for you as a driver: Yes No	)			
If employed as a driver, please answer the following: Start	rt Date : End Date :			
Company Driver Owner/Operator Other?				
Type of tractor operated: Type	e of trailer pulled:			
Other equipment operated: Comm	nodities operated:			
Accidents: Yes No If yes, please give the date a	and brief description of each accident:			
INQUIRY FOR ALCOHOL AND CONTROLLED SUBSTANC				
Alcohol tests with a result of 0.04 or greater?	No If yes, please give date:			
/erified positive controlled substances test results?	No If yes, please give date:			
Refusals to be tested?				
Rehab completed under direction of SAP/MRO? Yes	No If yes, please give date:			
Any problems with bonding? Yes No If yes, pleas	ase explain:			
Why did this employee leave your company?				
Nould you re-employee this person? Yes No If r	no, please explain:			
Additional comments: ( Any problems with customer relations	ns, supervision, or abuse of equipment?			
Name/Title (of person providing the above information): $A$	maz Meles			
Company: Diamond Trucking 1 LLC				
Date: 11/25/2023				

Royal3 Inc.



# SAFETY PERFORMANCE HISTORY RECORDS REQUEST

#### - CONFIDENTIAL -

**Company:** DIAMOND TRUCKING 1 LLC (DOT: 3011846) **Phone:** 7042530296 **Date:** 10/11/23

5

Address: 2225 DR MARTIN LUTHER KING JR ST INDIANAPOLIS, IN 46208 Fax:

Name/Title (of person providing the above information):

Company: \_\_\_\_\_

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.

from any and all liable type as a result of providing the fol Reginal cherelus (Oct 11, 2023 14:52 EDT)	· C21	111, 2023 15:37 EDT)	
Applicant's Signature	Company repre	Company representative	
Dear Personnel Manager The person named herein has applied to this compa applicant as a past employer. Will you kindly reply above, all liability of you and your company has be PLEASE BE ADVISED! You may reply by FAX +1 630	to this inquiry respecting this a en released by the applicant.	pplicant. As you will read waiver stated	
Name of Applicant: Reginal Chelerus	SSN: 198785610	Job Applying For: OTR Driver	
Did the Applicant work for you as a driver: Yes N	No		
_ ' ''' "	Start Date :	End Date :	
Type of tractor operated:			
Other equipment operated: Cor		<del></del>	
	e and brief description of each acci		
INQUIRY FOR ALCOHOL AND CONTROLLED SUBSTA	ANCES INFORMATION		
Alcohol tests with a result of 0.04 or greater?	s No If yes, please give d	ate:	
Verified positive controlled substances test results?	s No If yes, please give d	ate:	
Refusals to be tested?	es No If yes, please give d	ate:	
Rehab completed under direction of SAP/MRO?	es No If yes, please give d	ate:	
Any problems with bonding? Yes No If yes, pl	lease explain:		
Why did this employee leave your company?			
Would you re-employee this person? Yes No	If no, please explain:		
	ions, supervision, or abuse of equip	ment?	

Royal3 Inc.

Date: \_\_\_\_

### Zigi Freight Inc. dba Royal 3, Inc. 6850 W. 63<sup>rd</sup> St. Chicago, IL 60638

#### November 11, 2023

RE: Employee Verification Requests for Reginal Chelerus from SWIFT TRANSPORTATION.

To whom it may concern:

As of October 11, 2023 I have made the following attempts to contact SWIFT TRANSPORTATION in order to verify Reginal Chelerus's employment there.

The first attempt was made on October 25, 2023 when I sent a request at MARILYN BELLAMY@swifttrans.com which was recommended by safety person when I reached out through phone to their office.

On October 30, 2023 I re-sent request completing the second attempt and on November 6, 2023 I have made a third and final attempt. A formal response from SWIFT TRANSPORTATION you was never received.

Sincerely,

Sara Todorovic





### **Employment Verification for Reginal Chelerus**

**Employment Verifications** <ev@royal3inc.com> To: MARILYN BELLAMY@swifttrans.com Mon, Nov 6, 2023 at 1:33 PM

Hello,

I am a safety officer from Royal3 INC company.
I am sending you this email to confirm Reginal Chelerus's employment with your company.
Please find the attached form, and send it back to me at your earliest convenience.
Thank you!

Kind Regards, Sofia HR Department Zigi Freight dba Royal 3 Inc. 6850 W. 63rd St. Chicago, IL 60638 p. 630-485-7370 f. 630-485-6980 e. ev@royal3inc.com

03DQ Royal 3\_Cherelus Reginal-8.pdf 898K



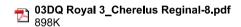
### **Employment Verification for Reginal Chelerus**

**Employment Verifications** <ev@royal3inc.com> To: MARILYN BELLAMY@swifttrans.com Mon, Oct 30, 2023 at 3:00 PM

Hello,

I am a safety officer from Royal3 INC company.
I am sending you this email to confirm Reginal Chelerus's employment with your company.
Please find the attached form, and send it back to me at your earliest convenience.
Thank you!

Kind Regards, Sofia HR Department Zigi Freight dba Royal 3 Inc. 6850 W. 63rd St. Chicago, IL 60638 p. 630-485-7370 f. 630-485-6980 e. ev@royal3inc.com





#### Employment Verifications <ev@royal3inc.com>

### **Employment Verification for Reginal Chelerus**

1 message

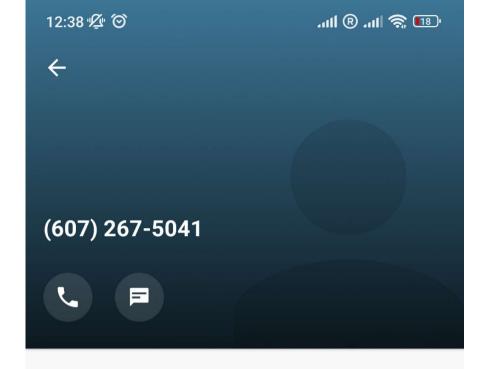
**Employment Verifications** <ev@royal3inc.com> To: MARILYN\_BELLAMY@swifttrans.com Wed, Oct 25, 2023 at 12:53 PM

Hello,

I am a safety officer from Royal3 INC company.
I am sending you this email to confirm Reginal Chelerus's employment with your company.
Please find the attached form, and send it back to me at your earliest convenience.
Thank you!

Kind Regards, Sofia HR Department Zigi Freight dba Royal 3 Inc. 6850 W. 63rd St. Chicago, IL 60638 p. 630-485-7370 f. 630-485-6980 e. ev@royal3inc.com

03DQ Royal 3\_Cherelus Reginal-8.pdf



10.31.23.

# Outgoing call

13:21 (44 sec)

# From

(630) 566-2119 (me)

(607) 267-5041

Phone number







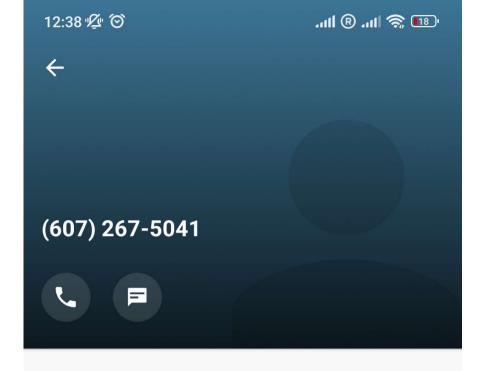
Create new contact



Add to existing contact







10.27.23.

### Outgoing call

14:11 (54 sec)

# From

(630) 566-2119 (me)

(607) 267-5041

Phone number







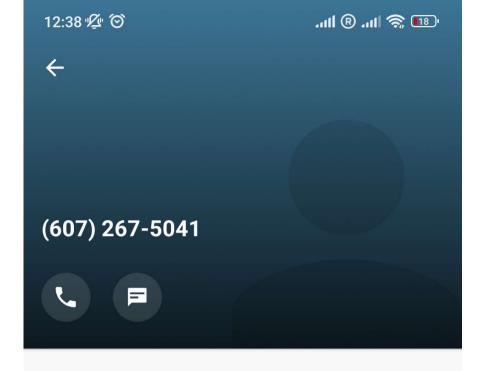
Create new contact



Add to existing contact







10.25.23.

# Outgoing call

12:53 (51 sec)

### From

(630) 566-2119 (me)

(607) 267-5041

Phone number







Create new contact



Add to existing contact







### SAFETY PERFORMANCE HISTORY RECORDS REQUEST

#### - CONFIDENTIAL -

Date: 10/11/23

Company: SWIFT TRANSPORTATION
Address: 2201 SW 57th Av, Ocala, FL 34474

Phone: 8888785283

Fax:

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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.

Reginal Cheretus (OCC 11, 2023 14:52 EDT)	Sala Todolovi (Oct 11, 2023 13.57 EDT)				
Applicant's Signature	Company representative				
Dear Personnel Manager The person named herein has applied to this company for emp applicant as a past employer. Will you kindly reply to this inqui above, all liability of you and your company has been released <u>PLEASE BE ADVISED!</u> You may reply by FAX +1 630 485 6980	iry respecting this applicant. As you will read waiver stated by the applicant.				
Name of Applicant: Reginal Chelerus SSN: 19878	35610 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.	erated:				
Accidents: Yes No If yes, please give the date and brief de	escription of each accident:				
Traffic Violations: Yes No If yes, please list all including t	the date and type of violation:				
INQUIRY FOR ALCOHOL AND CONTROLLED SUBSTANCES INFO	PRMATION				
Alcohol tests with a result of 0.04 or greater?   Yes  No If yes, please give date:					
Verified positive controlled substances test results?					
Refusals to be tested?					
Rehab completed under direction of SAP/MRO? Yes No If yes, please give date:					
Any problems with bonding? Yes No If yes, please explain:	<u> </u>				
Why did this employee leave your company?					
Would you re-employee this person? $\square$ Yes $\square$ No If no, please	explain:				
Additional comments: ( Any problems with customer relations, supervis	ion, or abuse of equipment?				
Name/Title (of person providing the above information):					

Date: \_\_\_\_ Royal3 Inc.