

Enter Company Name, MC or US DOT number



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DEDICATION LLC

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FMCSA Carrier Authority Information for DEDICATION LLC

DEDICATION LLC is an Inactive carrier operating under USDOT Number 3356921 an MC Number 1074285

Update info

Operating Status	Inactive
USDOT	3356921
MC NUMBER	MC-1074285
Last Safer Update	12-05-2021
Last FMCSA Update	09-12-2023
Out of Service Date	None
Entity Type	Carrier
Legal Name	DEDICATION LLC
Total Trucks	1
Total Drivers	1
Carrier Operation	Interstate
Hazardous Material	No
MCS-150 DATE	N
Fax	+1 (909) 253-7916
Cargo Hauled	General Freight



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SAFETY PERFORMANCE HISTORY
RECORDS REQUEST

- CONFIDENTIAL -

Company: DEDICATION LLC (USDOT 3356921)**Phone:****Date:** 10/27/23**Address:** INACTIVE**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.


Devin Isaiah Anderson (Oct 27, 2023 10:51 CDT)
Safety manager (Oct 27, 2023 16:12 CDT)

Applicant's Signature

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.

Name of Applicant: Devin Isaiah Anderson SSN: 618922571

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: _____