DRIVER/VEHICLE EXAMINATION REPORT

Virginia State Police Motor Carrier Safety Unit P O Box 27472 Richmond, VA 23261 Phone: (804) 278-5335 Fax: (804) 254-1635 Email/Web: mcsu2@vsp.virginia.gov Report Number: VA6016007650 Inspection Date: 04/04/2024 Start: 10:30 AM EDT End: 10:50 AM EDT Inspection Level: III HM Inspection Type: None

RIKI TRANSPORTATION INC 8225 LECLAIRE AVE	Driver: Cruz Violat, Allan License# C621000910880	Location: Clifton Forge VA MilePost: 31.4		
BURBANK, IL, 60459	State# FL	Highway: Interstate 64 WB		
dba: BRZ USDOT#: 3119062	Date of Birth# 03/08/1991	County: Alleghany County Shipper: None		
MC/MX#: State#:	CoDriver: License#	Bili of Lading: N/A Origin: WINCHESTER, VA, US Destination: COVINGTON, VA, US Cargo: Empty		
Phone#: 7083035150 Fax#:	State# Date of Birth#			

VEHICLE IDENTIFICATION

Unit	Туре	Make	Year	State	Plate #	Equipment ID	VIN	GVWR	Mileage	CVSA #	CVSA Issued #	OOS Sticker
					P1151473		1MIAN4GY6LM017939					
2	ST	GDAN	2022	ME	452003Z	W94951	1GR1P0627NJ324238	68,000				

VIOLATIONS ATTRIBUTABLE TO THE MOTOR CARRIER

Vio Code	Section	Unit	005	Citation #	Verify	Violations Discovered
392.2-SLLSR	392.2	С	N		N	State/Local Laws - State registration/tag violation. Truck is displaying the wrong plate. Should display P1180699/IL displayed on truck is P1151473/IL.

Special Checks:

No Data for Special Checks.

NOTE TO DRIVER: This report must be furnished to the motor carrier whose name appears at the top of this report. [49 CFR 396.9(d)(1)] NOTE TO MOTOR CARRIERS: 1) Sign and return this report ONLY if the driver and/or vehicle(s) have been placed Out of Service. RETURN ADDRESS -Virginia State Police Motor Carrier Safety. P O Box 27472, Richmond, VA 23261-7472; 2) DO NOT SEND TICKETS/CITATIONS/FINES TO THIS ADDRESS. CITATIONS/TRAFFIC TICKETS: If issued, MUST be returned to the COURT whose address appears on front of the TICKET/CITATION. 3) If the vehicle has NOT been repaired and HAS been permanently removed from service, initial here _______ and sign the report. 4) CARRIER CERTIFICATION: The undersigned certifies that all violations on this report have been corrected and action taken to assure compliance with the Motor Carrier Safety and HM Regulations insofar as they are applicable to motor carriers and drivers. This certification MUST BE SIGNED by the Motor Carrier and a copy retained at the principal place of business or where the vehicle is housed for 12 months from the date of the inspection. If the driver and/or vehicle has been declared out of service, this report must be RETURNED WITHIN 15 DAYS to the above address on the upper left corner of the form. Failure to return this report with the required certification can result in penalties up to \$1,000 per day for each day the violation continues, up to a total of \$10,000.

Signature Of Motor Carrier Official X: _

Date: _

Report Prepared By:	Bade
MTPR J. K. Jessee	60
X MTPA IK Jown	

<u>adge #: Radio #:</u> 6016 1128

Copy Received By: ALLAN CRUZ VIOLAT

X

Pagelofl



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