

DRIVER/VEHICLE EXAMINATION REPORT



Louisiana State Police
 CVE Region II
 Post Office Box 66601 Mail Slip A-32
 Baton Rouge, LA 70896-6601
 Phone: (225) 925-3800 Fax: (225) 925-3912
 Email/Web: lsp.motor.carrier.safety@la.gov

Report Number: LALARGS00521
 Inspection Date: 12/02/2024
 Start: 04:52 AM CST End: 05:12 AM CST
 Inspection Level: III
 HM Inspection Type: None

RIKI TRANSPORTATION INC
 8225 LECLAIRE AVE
 BURBANK, IL, 60459
 dba: BRZ
 USDOT#: 3119062
 MC/MX#:
 State#:
 Phone#: 7083035150
 Fax#:

Driver: Gallegos, Juan, Miguel
 License# G214761025000
 State# FL
 Date of Birth# 01/24/1984
 CoDriver:
 License#
 State#
 Date of Birth#

Location: Scott LA
 MilePost: 92
 Highway: Interstate 10
 County: Acadia Parish
 Shipper:
 Bill of Lading:
 Origin: HOUSTON, TX, US
 Destination: MORGAN CITY, LA, US
 Cargo: Beverages

VEHICLE IDENTIFICATION

Unit	Type	Make	Year	State	Plate #	Equipment ID	VIN	GVWR	Mileage	CVSA #	CVSA Issued #	OOS Sticker
1	TT	MACK	2020	IL	P1151479	829	1M1AN4GY2LM017940	53,200				
2	ST	WANC	2024	ME	5003274	HO3256	5VBVC5323RM409989	68,000				

VIOLATIONS ATTRIBUTABLE TO THE MOTOR CARRIER

Vio Code	Section	Unit	OOS	Citation #	Verify	Violations Discovered
392.22B-DFPWD	392.22(b)	D	N		N	Driver - Failed to place warning devices on the road surface: FAILED TO PLACE WARNING DEVICES BEHIND UNIT 2

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)]

Signature Of Motor Carrier Official X: _____ Date: _____

Other Driver / Carrier Notifications

I understand and acknowledge that the Louisiana Department of Public Safety and Corrections may notify the carrier, shipper, and / or other responsible party of this inspection and of possible and / or actual penalties for the violation(s) described above. Any responsible party will have an opportunity to request a fair and impartial hearing in accordance with the Administrative Procedure Act, for any proposed civil penalty.

NOTE TO CARRIER:

CARRIER: If this vehicle has been identified to have SELF-ADJUSTING BRAKE VIOLATIONS: A qualified service technician needs to determine why the defective brake has excessive stroke and make the appropriate repairs. Simply re-adjusting the brake adjuster, or replacing it, does not guarantee that the problem is corrected. The problem may exist in the foundation brake system. By certifying this inspection report [396.9(d)] you have indicated that this vehicle now has a properly functioning self-adjusting brake adjustment system.

In accordance with FMCSR 396.9(d), the motor carrier SHALL certify that all EQUIPMENT violations noted have been corrected by the below certification. This certification must be signed and returned to the above address within 15 days following the date of the inspection. A copy of this report must be retained by the carrier for 12 months from the date of inspection.

CERTIFICATION OF ACTION TAKEN: the undersigned certifies that all EQUIPMENT violations noted on this report have been corrected. Failure to certify noted repairs may result in additional penalties.

Signature Of Motor Carrier X: _____ Title: _____
 Date: _____

If you Suspect Human Trafficking, Please call 911 and The National Hotline at 1-888-373-7888 or Text INFO or HELP to BEFREE (233733). Make The Call. Save Lives.

Report Prepared By:
 TFC Derek Noel

Badge #: Radio #:
 LARGS 2835

Copy Received By:
 JUAN MIGUEL GALLEGOS

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X TFC

X

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Location: Scott LA
MilePost: 92
Highway: Interstate 10
County: Acadia Parish
Shipper:
Bill of Lading:
Origin: HOUSTON, TX, US
Destination: MORGAN CITY, LA, US
Cargo: Beverages

STATE INFORMATION

MCSAP Information: Duty Status: C; Troop: I; Region: 2; Attachments: N; Photographs: Y; Shipper same as Carrier: N; Human Trafficking: N; HT Investigation Initiated: N; Radar/Lidar #: N; Driver's License Class: A; Race (B, W, O): O; Gender: M; Age: 40; Driver's Street Address: 1717 NE AVENUE J; Driver's City: BELLE GLADE; Driver's State: FL; Driver's Zip: 33430; Driver's Phone Number: 5614549117; Terminal Manager: SMITH
Correct Mail Address: Driver's Mailing Address: ; Driver's City: ; Enter driver's state: ; Driver's Zip:

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