

DRIVER/VEHICLE INSPECTION REPORT (Driver Copy)



ILLINOIS STATE POLICE
COMMERCIAL VEHICLE SECTION
801 S. SEVENTH STREET, SUITE 200-N
SPRINGFIELD IL 62703
(217)782-6267

Officer No 7159	Date 04/02/2025	Begin Time 08:46	Time Zone CENTRAL TIME	Inspection Number IL4289110460
Commerce Type 1 - INTERSTATE	Inspection Level 2 - WALK-AROUND DRIVER / VEHICLE			Photos Taken? NO
County MCLEAN	Location Number 999	Location Description 174		
Mile Post # 122	Special Checks	GPS Latitude 40.65753003606	GPS Longitude -89.1072915744	

DRIVER					
DRIVER Name - Last MOORE	First MARK	Middle ALEXANDER	Suffix		
Address 3710 N PINE ISLAND RD APT 219		City SUNRISE	State FL	Zip Code 33361	
Driver License Number M219819785000	State of License FL	Date of Birth 08/07/1988	CDL Class A	Endorsement(s) NONE	Restriction(s) NONE
Drug Search NO	Arrests 0	Alcohol Test Administered NO		Results	BAC

CARRIER					
MOTOR CARRIER Name RIKI TRANSPORTATION INC					
Address 8225 LECLAIRE AVE			City BURBANK	State IL	Zip Code 60459
U.S. DOT Number 3119062	ICC Number 86875	IL CC Number	Phone Number (708) 303-5160	Fax Number	

VEHICLES									
Unit 001	Company Unit 812	Year 2020	Vehicle Make MACK	Type TT	State IL	License # P1161463	GVWR 65,000	VIN # 1M1AN4GY0LM017922	
Existing CVSA Decal Status		Existing CVSA Decal #		CVSA Decal Issued #			OOS Sticker #		
Cargo Seal Removed		Removed Time		Cargo Seal Replaced			Replaced Time		
Unit 002	Company Unit	Year 2024	Vehicle Make HYTR	Type ST	State TN	License # 460400T	GVWR 65,000	VIN # 3H3V632K7RS119292	
Existing CVSA Decal Status		Existing CVSA Decal #		CVSA Decal Issued #			OOS Sticker #		
Cargo Seal Removed		Removed Time		Cargo Seal Replaced			Replaced Time		

LOAD									
Origin City ROANOKE	State VA	Destination City EAST PEORIA	State IL	Exempt #	HazMat Code	Reportable Qty	Haz Waste		
Shipping Paper # 8710360630	Shipper Name TRIVIUM PACKAGING			Picards Required	HazMat Code	Reportable Qty	Haz Waste		
Cargo OTHER - 23	Cargo Breakdown		Bulk Materials?	Cargo Tank Specs	HazMat Code	Reportable Qty	Haz Waste		

VIOLATIONS					
Identification 6-112	Unit No D - DRIVER	Out Of Service NO	Post Crash	Verification N	Warning Warning
Description FAIL TO CARRY DRIVER'S LICENSE ON PERSON WHILE OPERATING A MOTOR VEHICLE					
Additional Description DOESNT HAVE DL WITH HIM					

DRIVER'S SIGNATURE: I acknowledge being present while the above vehicle was inspected and have been informed of the above infractions and/or deficiencies. IL42891	OFFICER'S SIGNATURE: I hereby note that I certify I conducted the level of inspection noted above unless otherwise indicated in the Notes section. TPR & 1/1/25 #7159 IL42891	Date Completed 04/02/2025 Time Completed 08:54
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DRIVER :	This report must be furnished to the motor carrier whose name is listed on this report.
MOTOR CARRIER :	<p>Within 15 days after your driver receives an inspection report, you, as the carrier, must sign and return a copy of that report to the office indicated below. As verification that all defects or violations have been corrected to assure compliance with the Illinois Motor Carrier Safety Act, please mail or fax a signed copy to the following address:</p> <p>Illinois State Police, Commercial Vehicle Section 801 S. Seventh Street, Suite 200-N Springfield, IL 62703 Telephone: (217) 782-6267 Fax: (217) 624-2391</p>
The undersigned certifies that all violations noted on this report have been corrected and action has been taken to assure compliance with the Federal and State Motor Carrier Safety and Hazardous Material Regulations insofar as they are applicable to motor carriers and drivers. I understand that failure to comply will subject me to additional violations under the regulations noted.	
Signature of Carrier Official	Title Date Signed



IL4289110450