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(800) 683-8553

# DRIVER RECORD SERVICE REPORT FOR NEW YORK

618782628

REPORT DATE	REQUESTOR	ACCT#	SEQUENCE#	BILL CODE	PAGE
01/21/2025	PAR	305503	152842282	000	1

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LICENSEE NAME/ADDRESS	LICENSE NUMBER	LICENSE CLASS	STATUS
SINGH,KULWINDER 130-19 127TH ST 2FL STH OZONE PARK NY 11420	159028774	CDL *A*	VALID
	DATE OF BIRTH	RESTRICTIONS	
	12/29/1994	NONE	
ISSUED	EXPIRES	DRIVER DESCRIPTION	
01/31/2018	12/29/2026	Gender: M Height: 5-6 Eye Color: BROW	

REPORT PREPARED FOR	COMMENT
PARMJIT DHAMI AGENCY 2663 KRISTEN ST LIVE OAK, CA 95953-2829	PAR

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## MISCELLANEOUS AND STATE SPECIFIC INFORMATION

REQUESTED AS: DOB: LICENSE: 159028774  
COMM:01: ACTIVE VALID CDL \*A\* 0131201812292026 NONE NONE  
CDL CLASS: CDL \*A\* DESC: CDL COMBO VEH > 26K, TOW > 10K  
CDL STATUS: VALID  
CDL ISSUED: 01/31/2018  
CDL EXPIRES: 12/29/2026  
CDL RESTR: NONE  
CDL ENDMT: NONE  
NAME ON LICENSE/ID: SINGH,KULWINDER  
PROBATION START: 01/31/2018 END: 07/31/2018  
CLIENT ID#: 159028XXX  
COUNTY: QUEENS  
MI #: S09507 63057 44814X-XX  
\*\*\*\*\* ACTIVITY \*\*\*\*\*  
CDL A 07/09/2024 ENDORSEMENTS: NONE  
RESTRICTIONS: NONE  
CDL A 08/09/2022 ENDORSEMENTS: NONE  
RESTRICTIONS: NONE  
CDL A 12/16/2019 ENDORSEMENTS: NONE  
RESTRICTIONS: NONE  
CDL A 03/18/2019 ENDORSEMENTS: NONE  
RESTRICTIONS: NONE  
CLASS CHANGE: 03/10/2018 NEW: \*D\* OLD: PERMIT  
DOCUMENT SURRENDERED ON: 01/18/2019 TO CA  
RETURNED TO NY ON: 03/18/2019  
CLASS CHANGE: 03/18/2019 NEW: CDL \*A\* OLD: \*D\*  
DOCUMENT SURRENDERED ON: 01/29/2021 TO CA  
RETURNED TO NY ON: 08/09/2022  
RECIPROCITY ON: 08/09/2022 FROM CA  
CLASS CHANGE: 08/09/2022 NEW: CDL \*A\* OLD: CDL \*A\*  
NOTE Request match analysis: dl=Y, ln=?, fn=?, dob=?

DRIVING RECORD HISTORY					
TYPE	VIOL/SUSP	CONV/REI	DESCRIPTION	CODE	POINTS
** CLEAR RECORD **					

If you are an iiX Customer, and have questions contact:  
iiX  
1574 Crescent Pointe Pkwy  
College Station, TX 77845  
Telephone: 1-800-683-8553

Refer Consumer to:  
iiX-FCRA  
1574 Crescent Pointe Pkwy  
College Station, TX 77845  
Telephone: 1-866-560-7015

\*\*\* END OF REPORT \*\*\*