DRIVER RECORD SERVICE REPORT FOR CALIFORNIA

| A Verisk Business www.iix.co | m | REPORT DATE | REQUESTOR | ACCT# | SEQUENCE# | BILL CODE | 616076818 PAGE | |
|---|------------|---|--------------------|--------------|------------|-----------|-------------------|--|
| (800) 683-8553 | | 01/06/2025 | PAR | 305503 | 149358324 | 000 | PAGE 1 | |
| | | | | | ENSE CLASS | | ATUS | |
| LICENSEE NAME/ADDRESS SINGH SIMARJOT | | LICENSE NUMBER Y9250573 | | CDL-A | | - | ALID | |
| SINGH SIMARJUT | | | | | | | ALID | |
| | | DATE OF BIRTH | | RESTRICTIONS | | | | |
| | | 10/10/199 | 0 | | | | | |
| ISSUED | EXPIRES | | DRIVER DESCRIPTION | | | | | |
| 12/11/2024 | 04/10/2029 | Height: 6'01 Weight: 200 Eye Color: BROW Hair Color: BLAC | | | | | | |

| 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: SINGH DOB: LICENSE: Y9250573 COMM:01: ACTIVE V A 1211202404102029 CDL CLASS: A DESC: CDL COMBO VEHICLE > 26K, TOW > 10K CDL STATUS: V DESC: VALID CDL ISSUED: 12/11/2024 DESC: VALID CDL EXPIRES: 04/10/2029 V LIC STATUS: V DESC: VALID DRIVING STATUS: ELIGIBLE MED CERT: UNKNOWN MED CERT1 SELF CERT: UNKNOWN 12062026 MED CERT1 SEXIF CERT: UNKNOWN MED CERT1 SEXIF CERT: UNKNOWN MED CERT1 SEXIF CERT: UNKNOWN MED CERT1 SEXIF CERT: UNKNOWN MED CERT1 SEXIF CERT: UNKNOWN NOTE Request match analysis: dI=Y, In=Y, fn=?, dob=? | | | | | | | | | |
|---|---|----------------------|--|--------|---|--|--|--|--|
| ТҮРЕ | VIOL/SUSP | CONV/REI | DRIVING RECORD HISTORY DESCRIPTION | CODE | POINTS | | | | |
| VIOLC | 11/29/2022 | 05/12/2023 | FAIL TO OBEY TRAFFIC SIGNALS STATUTE: VC ACD CODE: M17 DOC#: R261737 VEH LIC#: XP96178 CT LOC: 48430 COM VEH: YES | 21461A | 1.5 | | | | |
| iiX 1574 Cre College S | e an iiX Customer, scent Pointe Pkwy Station, TX 77845 e: 1-800-683-8553 | and have questions (| contact: | | Refer Consumer to: iiX-FCRA 1574 Crescent Pointe Pkwy College Station, TX 77845 Telephone: 1-866-560-7015 | | | | |
| *** END OF REPORT *** | | | | | | | | | |
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