

# **DRIVER HISTORY REPORT**

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**CALIFORNIA DEPARTMENT OF MOTOR VEHICLES**

**\*\*\*CUSTOMER RECEIPT COPY\*\*\***

**DRIVER LICENSE/IDENTIFICATION CARD**

**INFORMATION REQUEST**

**02/26/2025**

**"**

**DATE:02-26-25\*TIME:14:46\***

**DL/NO:W9194390\***

**B/D:02-09-1996\*NAME:MANISH,MANISH\***

**IDENTIFYING INFORMATION:**

**SEX:MALE\*HAIR:BLACK\*EYES:BLK\*HT:5-07\*WT:140\***

**LIC/ISS:09-12-24\* EXP:02-09-29\*CLASS:A COMMERCIAL\***

**ENDORSEMENTS:**

**NONE\***

**MEDICAL EXPIRES:08-06-26\***

**MEDICAL CERTIFICATE INFORMATION:**

**ISSUE DATE: 08-06-24 EXPIRATION DATE: 08-06-26**

**STATUS CODE: C**

**MED EXAMINER NUMBER: CA DC31450**

**"**

**MED REGISTRY NUMBER: 8604794943**

**SPECIALTY: CH MED EXAMINER PHONE NUMBER: 2098243100**

**MED EXAMINER NAME:**

**LAST NAME: SIDHU**

**FIRST NAME: SANDEEP**

**MIDDLE NAME: K**

**MED CERT RESTRICTIONS: NONE**

**SPE EFF DATE: NONE**

**DRIVER WAIVER TYPE: NONE**

**SELF CERTIFICATION INFORMATION:**

**SELF CERTIFICATION CODE: NI**

**RESTRICTIONS:**

**E-CLASS A/B-LIMITED TO VEHICLE WITH AUTOMATIC TRANSMISSION\***

**COMMERCIAL LICENSE STATUS:**

"

**VALID\***

**LICENSE STATUS:**

**VALID\***

**DEPARTMENTAL ACTIONS:**

**NONE\***

**CONVICTIONS:**

**NONE\***

**FAILURES TO APPEAR:**