



**MOTOR CARRIER FACTORS ATTACHEMENT**

**Accident Driver Roadside Inspection Reports**

**Randolph, NH**

**HWY19MH010**

(3 pages)

DRIVER/VEHICLE EXAMINATION REPORT

Query Central 3.4

Report Number: IA
Inspection Date: 02/18/2019
Start: 12:00 PM CT End: 12:57 PM CT
Inspection Level: III - DriverOnly
HM Inspection Type: None

FBI EXPRESS INC
WESTFIELD, MA 01085
USDOT#: 02192976
MC/MX#: 00761080
State#:

Phone#:
Fax#:

Driver: ZHUKOVSKYY, VOLODYMYR V
License#:
Date of Birth:
CoDriver:
License#:
Date of Birth:
State: MA
State:

Location: I-80
Highway: I-80
County:

MilePost: 168
Origin: MD
Destination: IA

Shipper: MERCEDES BENZ PORT
Bill of Lading: 3894805
Cargo:

VEHICLE IDENTIFICATION

Table with columns: Unit, Type, Make, Year, State, Plate #, Equipment ID, VIN, GVWR, CVSA #, New CVSA #, OOS#. Contains two rows of vehicle data.

BRAKE ADJUSTMENTS: No Brake Measurements Required For Level 3

VIOLATIONS

Table with columns: Vio Code, Section, Unit, OOS, Citation #, Verify, Crash, Violations Discovered. Lists two violations related to lane usage and equipment.

HazMat: No HM Transported.

Placard: No Cargo Tank:

Special Checks:

Failure to return this report with the required certification can result in penalties up to \$1,000 per day for each day the violation continues, up to a total of \$10,000.

Signature Of Repairer X: Facility: Date:

Carrier Verify Text

Signature Of Motor Carrier X: Title: Date:

Report Prepared By:
Cubit Brad

Badge #:

Copy Received By:
VOLODYMYR ZHUKOVSKYY

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**DRIVER/VEHICLE EXAMINATION REPORT**

Query Central 3.4

Virginia State Police  
 Motor Carrier Safety Unit  
 P. O. Box 27472  
 Richmond, VA 23261-7472  
 Phone: (549) 829-7414 Fax: (804) 254-1635

Report Number: [REDACTED]  
 Inspection Date: 05/01/2019  
 Start: 7:40 AM ET End: 07:52 AM ET  
 Inspection Level: III - DriverOnly  
 HM Inspection Type: None

FBI EXPRESS INC  
 [REDACTED]  
 WEST SPRINGFIELD, MA 01085  
 USDOT#: 02192976 Phone#: [REDACTED]  
 MC/MX#: 00761080 Fax#: [REDACTED]  
 State#:

Driver: ZHUKOVSKYY, VOLODYMYR V  
 License#: [REDACTED] State: MA  
 Date of Birth: [REDACTED]  
 CoDriver:  
 License#: [REDACTED] State:  
 Date of Birth:

Location: 291 SB ENTRANCE MilePost: 291 Shipper: MANHIEM AUCTIONS  
 Highway: I 81 Origin: BEL AIR, MD Bill of Lading: 6155694330  
 County: Destination: DALLAS, TX Cargo: MOTOR VEHICLES

**VEHICLE IDENTIFICATION**

Unit	Type	Make	Year	State	Plate #	Equipment ID	VIN	GVWR	CVSA #	New CVSA #	OOS#
1	TT	MACK	2018	MA	[REDACTED]	230	1M1AN4GY3JM[REDACTED]	49,825			
2	ST	CTRL	2005	ME	[REDACTED]	270	5E0AU17435G0[REDACTED]	55,500			

**BRAKE ADJUSTMENTS:** No Brake Measurements Required For Level 3

**VIOLATIONS**

Vio Code	Section	Unit	OOS	Citation #	Verify	Crash	Violations Discovered
392.2PK	392.2PK	D	N		N	N	Unlawfully parking and/or leaving vehicle in the roadway: Parked on entrance ramp posted NO PARKING.
392.22A	392.22A	D	N		N	N	Failing to use hazard warning flashers: None active.
392.22B	392.22B	D	N		N	N	Failure to place or improper placement of warning devices on the road surface: None placed.

**HazMat:** No HM Transported. **Placard:** No **Cargo Tank:**

**Special Checks:** Traffic Enforcement;

**NOTE TO DRIVER:** This report must be furnished to the motor carrier whose name appears at the top of this report. In instances where a vehicle(s) has been placed out of service, repairs certification is required below. Failure to return this report with the required certification can result in penalties up to \$1,000 per day for each day the violation continues, upto a total of \$10,000.

Signature Of Repairer X: \_\_\_\_\_ Facility: \_\_\_\_\_ Date: \_\_\_\_\_

1) Sign and return this report ONLY if the driver and/or vehicle(s) have been placed Out of Service. RETURN ADDRESS: Virginia State Police Motor Carrier Safety P O Box 27472 Richmond, VA 23261-7472 DO NOT SEND TICKETS/CITATIONS/FINES TO THIS ADDRESS 2) CITATIONS/TRAFFIC TICKETS: if issued, MUST be returned to the COURT whose address appears on front of the TICKET/CITATION. 3) if the vehicle has NOT been repaired and HAS been permanently removed from service, initial here and sign the report. 4) CARRIER CERTIFICATION: The undersigned certifies that all violations on this report have been corrected and action taken to assure compliance with the Motor Carrier Safety and HM Regulations insofar as they are applicable to motor carriers and drivers. This certification MUST BE SIGNED by the Motor Carrier Official and RETURNED WITHIN 15 DAYS to the above address (#1).

Signature Of Motor Carrier X: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Report Prepared By:  
 MICHAEL C BRILL

Badge #: [REDACTED]  
 Copy Received By:  
 VOLODYMYR ZHUKOVSKYY

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