

CALIFORNIA DEPARTMENT OF MOTOR VEHICLES

CUSTOMER RECEIPT COPY

DRIVER LICENSE/IDENTIFICATION CARD

INFORMATION REQUEST

10/28/2021

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DATE:10-28-21*TIME:10:00*

DL/NO:B3346427*

B/D:01-14-1968*NAME:BARBOSA,CARLOS ENRIQUE*

IDENTIFYING INFORMATION:

SEX:MALE*HAIR:GREY*EYES:BRN*HT:5-11*WT:190*

LIC/ISS:11-26-18* EXP:01-14-24*CLASS:A COMMERCIAL*

ENDORSEMENTS:

DOUBLES/TRIPLES,HAZARDOUS MATERIALS,TANK VEHICLE*

TSA CLEARANCE APPROVED HAZARDOUS MATERIALS ENDORSEMENT EXP:05-10-24

MEDICAL EXPIRES:03-15-23*

MEDICAL CERTIFICATE INFORMATION:

ISSUE DATE: 03-15-21 EXPIRATION DATE: 03-15-23

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STATUS CODE: C

MED EXAMINER NUMBER: CA 23138

MED REGISTRY NUMBER: 1088420607

SPECIALTY: CH MED EXAMINER PHONE NUMBER: 8587761423

MED EXAMINER NAME:

LAST NAME: WEITZMAN

FIRST NAME: CHARLES

MED CERT RESTRICTIONS: 1

SPE EFF DATE: NONE

DRIVER WAIVER TYPE: NONE

SELF CERTIFICATION INFORMATION:

SELF CERTIFICATION CODE: NI

RESTRICTIONS:

MUST WEAR CORRECTIVE LENSES WHEN DRIVING*

MUST WEAR CORRECTIVE LENSES WHEN DRIVING COMMERCIALY*

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COMMERCIAL LICENSE STATUS:

VALID*

LICENSE STATUS:

VALID*

DEPARTMENTAL ACTIONS:

NONE*

CONVICTIONS:

NONE*

FAILURES TO APPEAR:

NONE*

ACCIDENTS:

NONE*

END