

**CALIFORNIA** USA **COMMERCIAL DRIVER LICENSE**

DL **D9183257**

EXP **07/04/2015**

LN **SINGH**

FN **HARWINDER**

2066 N DELBERT AVE  
FRESNO, CA 93722

DOB **07/04/1987**

RSTR **NONE**

CLASS A  
END NONE

07041987

SEX M HAIR BLK EYES BRN

HGT 5-11" WGT 190 lb

ISS 06/29/2012

DD 08/31/201052929/CCFD/15

*Harwinder Singh*

**SOCIAL SECURITY**

**619-53-9249**

THIS NUMBER HAS BEEN ESTABLISHED FOR

**HARWINDER SINGH**

*Harwinder Singh*

SIGNATURE

**MEDICAL EXAMINER'S CERTIFICATE**

I certify that I have examined Harwinder Singh  
Driver License # D9183257 in accordance with the Federal  
Motor Carrier Safety Regulations (49 CFR 391.41-391.49) and with  
knowledge of the driving duties, I find this person qualified; and, if  
applicable, only when:

☐ wearing corrective lenses. ☐ wearing hearing aid.

☐ accompanied by a \_\_\_\_\_ waiver/exemption

☐ accompanied by a Skill Performance Evaluation Certificate (SPE)

☐ qualified by operation of 49 CFR 391.64

☐ driving within an exempt intracity zone (49 CFR 391.62)

Med. eff. date 08-27-12 Med. exp. date 08-27-14

The information I have provided regarding this physical examination is  
true and complete. A complete examination form with any attachment  
embodies my findings completely and correctly, and is on file in my office

(FOLD HERE)

MEDICAL EXAMINER'S NAME (PRINT)  
David H. Anderson, D.C.

TITLE ☐ Physician ☐ MD ☐ DO ☒ Chiropractor  
☐ Physician Assistant ☐ Advanced Practice Registered Nurse

ADDRESS  
3209 W. Shaw St. #114, Fresno CA 93711

STATE MEDICAL LICENSE OR CERTIFICATE NO. 21217 STATE OF ISSUE CA

MEDICAL LICENSE/CERTIFICATE ISSUE DATE 07-31-12 MEDICAL LICENSE/CERTIFICATE EXPIRATION DATE 07-31-13

MEDICAL EXAMINER'S SIGNATURE [Signature] TELEPHONE NUMBER (559) 224-4977

DL 51A (REV. 1/2012)



# California

USA

## COMMERCIAL DRIVER LICENSE



DL **D9183257**

CLASS A

EXP **07/04/2025**

END NONE

LN **SINGH**

FN **HARWINDER**

2663 N ELENDALE AVE  
FRESNO, CA 93722

DOB **07/04/1987**

RSTR NONE

**07041987**



SEX **M**

HAIR **BLK**

EYES **BRN**

HGT **5'-11"**

WGT **220 lb**

ISS **10/06/2020**

DD **09/29/2020215E4/AAAFD/25**

*Harwinder Singh*



# CALIFORNIA COMMERCIAL DRIVER LICENSE



DL D9990432

EXP 06/06/2015

LN DHINDSA

FN BALDEEP SINGH

2066 N DELBERT AVE  
FRESNO, CA 93722

DOB 06/06/1990

RSTR NONE

CLASS A  
END NONE

06061990

SEX M HAIR BLK EYES BLK

HGT 5'-09" WGT 150 LB

ISS 12/21/2012

BALDEEP DHINDSA

DD 12/21/2012 0541/AAPD/15

## SOCIAL SECURITY

621-59-5412

THIS NUMBER HAS BEEN ESTABLISHED FOR

BALDEEP SINGH

ADMINISTRATION

SIGNATURE

### MEDICAL EXAMINER'S CERTIFICATE

I certify that I have examined Baldeep Singh  
Driver License # D9990432 in accordance with the Federal  
Motor Carrier Safety Regulations (49 CFR 391.41-391.49) and with  
knowledge of the driving duties, I find this person qualified; and, if  
applicable, only when:

- ☐ wearing corrective lenses. ☐ wearing hearing aid.
- ☐ accompanied by a \_\_\_\_\_ waiver/exemption
- ☐ accompanied by a Skill Performance Evaluation Certificate (SPE)
- ☐ qualified by operation of 49 CFR 391.64
- ☐ driving within an exempt intracity zone (49 CFR 391.62)

Med. eff. date 4-13-12 Med. exp. date 04-13-14

The information I have provided regarding this physical examination is  
true and complete. A complete examination form with any attachment  
embodies my findings completely and correctly, and is on file in my office

(FOLD HERE)

MEDICAL EXAMINER'S NAME (PRINT)

David H. Anderson, DC

TITLE ☐ Physician ☐ MD ☐ DO ☒ Chiropractor  
☐ Physician Assistant ☐ Advanced Practice Registered Nurse

ADDRESS

3209 W. Shaw St. #114, Fresno, CA 93711

STATE MEDICAL LICENSE OR CERTIFICATE NO.

STATE OF ISSUE

21217

CA

MEDICAL LICENSE/CERTIFICATE ISSUE DATE

MEDICAL LICENSE/CERTIFICATE EXPIRATION DATE

07-28-11

07-31-12

MEDICAL EXAMINER'S SIGNATURE

TELEPHONE NUMBER

[Signature]

(559) 224-4977

DL STA (REV. 1/2012)

California

USA

COMMERCIAL  
DRIVER LICENSE



DL **D9990132**

CLASS A

EXP **06/06/2025**

END NONE

LN **DHINDSA**

FN **BALDEEP SINGH**

2066 N DELBERT AVE  
FRESNO, CA 93722

DOB **06/06/1990**

RSTR NONE



**06061990**

*Baldeep Singh*

SEX **M**

HAIR **BLK**

EYES **BLK**

HGT **5'-09"**

WGT **170 lb**

DOB

ISS

DD **11/19/2020** 15A6/AAFD/25

**11/19/2020**