4/1/25, 4:36 PM MVR -



## DRIVER RECORD SERVICE REPORT FOR TEXAS

632146476

REPORT DATE REQUESTOR ACCT# SEQUENCE# BILL CODE PAGE   04/01/2025 PAR 305503 171740515 000 1							00200
04/01/2025 PAR 305503 171740515 000 1		REPORT DATE	REQUESTOR	ACCT#	SEQUENCE#	BILL CODE	PAGE
0*	0*	04/01/2025	PAR	305503	171740515	000	1

LICENSEE	NAME/ADDRESS	LICENSE NUMBER	LICENSE CLASS	STATUS
KUMAR, VINOD		17921487	CDL-A	CLEAR
2500 RAILRIDGE CIR N AF		DATE OF BIRTH	RESTRICTIONS	
FORT WORTH, TX 76133-	5836	01/25/1965		
ISSUED	EXPIRES	DRIVER DESCRIPTION		
	01/25/2029			

REPORT PREPARED FOR	COMMENT
	PAR
2663 KRISTEN ST	
LIVE OAK, CA 95953-2829	

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\*\*\*\*\* Ordered from the iiX MVR Archive Database. Original Report Date was 03/11/2025. \*\*\*\*\*

MISCELLANEOUS AND STATE SPECIFIC INFORMATION

REQUESTED AS: KUMAR DOB: 01251965 LICENSE: 17921487 CLEAR A 01252029 TANK VEHICLE COMM:01: ACTIVE CDL CLASS: A DESC: COMBO VEHICLE > 26K, TOW > 10 K

CDL STATUS: CLEAR CDL EXPIRES: 01/25/2029 CDL ENDMT: TANK VEHICLE ORIGINAL ISSUE DATE: 01/15/1997

AMOUNT OF HISTORY: 3 YEARS MED CERT: ACTIVE NI 0630202306302025 MED CERT1 STATUS: CERTIFIED

MED CERT1 SELF CERT: NON-EXCEPTED INTERSTATE

MED CERT1 ISSUED: 06/30/2023

MED CERT1 EXPIRES: 06/30/2025

MED CERT3 EXAMINER NAME: MARK SANEMAN

MED CERT3 EXAMINER SPECIALTY: CHIROPRACTOR

MED CERT3 LICENSE JURISDICTION: TEXAS

MED CERT3 LICENSE NUMBER: 07883 MED CERT3 NATIONAL REG NUMBER: 4095769251

MED CERT3 TELEPHONE: (817)615-8200

THIS TYPE OF RECORD WILL NOT REFLECT COMPLETION OF A DRIVING SAFETY COURSE.

THIS RECORD REFLECTS CONVICTIONS AND CRASH INVOLVEMENTS THAT ARE ALLOWED TO BE DISPLAYED BY LAW.

NOTE Request match analysis: dI=Y, In=Y, fn=?, dob=Y

DRIVING RECORD HISTORY						
TYPE	VIOL/SUSP	CONV/REI	DESCRIPTION	CODE	POINTS	

CH

\*\* CLEAR RECORD \*\*

If you are an iiX Customer, and have questions contact:

1574 Crescent Pointe Pkwy College Station, TX 77845 Telephone: 1-800-683-8553 Refer Consumer to:

1574 Crescent Pointe Pkwy College Station, TX 77845 Telephone: 1-866-560-7015

\*\*\* END OF REPORT \*\*\*