

# DRIVER/VEHICLE EXAMINATION REPORT



PA State Police - Commercial Vehicle Safety Div.  
1800 Herr. St. (Tent Bldg.) Harrisburg, PA. 17103  
RA-SPPSPReportCert@pa.gov  
Harrisburg, PA 17103-1213  
Phone #: (000)000-0000 Fax #: (000)000-0000  
Data Challenges : http://dataqs.fmcsa.dot.gov

Report Number: PAE966217365  
Inspection Date: 6/22/2022 Certification Date:  
Time Started: 07:45 Time Ended: 09:00  
Inspection Level: I - Walk-Around  
HM Inspection Type: No HM Inspection

ROY SALMON TRUCKING LLC

PO BOX 799

RANDALLSTOWN, MD 21133

USDOT #: 02100090

MC/MX #: 00732479

State #:

Phone #: (443)629-4648

Fax #:

Driver: WHITAKER, CHARLES B  
License #: W326115085893 State: MD  
Date of Birth: 11/22/1994

Location: US30 E MEASURING 520 FEET EAST MilePost:

Highway: US30 E MEASURING 520 FEET

County: YORK

Shipper:

Origin: BALTIMORE, MD

Destination: LANCASTER, PA

Bill of Lading:

Cargo: PAPER PRODUCTS

## VEHICLE IDENTIFICATION:

Unit	Type	Make	Year	State	License#	Equipment ID	Unit VIN	GVWR	CVSA #	CVSA Issued #	OOS Stkr.#
1	TT	VOLV	2014	MD	879F92	004	4V4NC9TG2EN154315	17,000			
2	ST	HYTR	2018	ME	2399405	3804	3H3V532C7JR097024	0			

BRAKE ADJUSTMENTS: No brake measurements recorded.

## VIOLATIONS :

Vio Code	Section	Unit	OOS	State Citation Number	Verify*	Crash	Violation Description
392.2-SLLS4	392.2	D	N		N	N	STATE/LOCAL LAWS - SPEEDING 15 OR MORE MILES PER HOUR OVER THE SPEED LIMIT. PACED BY J6-10 AT 70MPH IN A POSTED 55MPH ZONE
383.23A2	383.23(a)(2)	D	Y		U	N	OPERATING A CMV WITHOUT A CDL DRIVER LICENSE
392.2WC	392.2	2	N		N	N	DOWNGRADED. MED CERTIFICATION EXPIRED 09/05/2021
396.17C	396.17(c)	2	N		N	N	WHEEL (MUD) FLAPS MISSING OR DEFECTIVE, LEFT SIDE MUD FLAP MISSING
							OPERATING A CMV WITHOUT PROOF OF A PERIODIC INSPECTION. DATE ON INSPECTION FADED OUT. APPEARS TO BE 05/2021. EXPIRED 05/2022. NO CURRENT INSP PAPERWORK IN TRAILER

\* N - Non-OOS or Driver OOS Violation; U - Unknown

HazMat: No HM Transported.

Placard: NA Cargo Tank:

## Special Checks:

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Alcohol/Controlled Substance Check | <input checked="" type="checkbox"/> Traffic Enforcement | <input type="checkbox"/> Post Crash Inspection |
| <input type="checkbox"/> Conducted by Local Jurisdiction    | <input type="checkbox"/> PASA Conducted Inspection      | <input type="checkbox"/> PBBT Inspection       |
| <input type="checkbox"/> Size and Weight Enforcement        | <input type="checkbox"/> Drug Interdiction Search       | Arrests:                                       |
| <input type="checkbox"/> EScreening                         |   |  |

Pursuant to section 4704(C) of the Vehicle Code, I hereby declare the driver CHARLES B. WHITAKER named in this Driver Vehicle Inspection Report to be "Out of Service" until 2005--0 ::00. CHARLES B. WHITAKER shall not operate, nor shall any motor carrier permit or cause said driver to drive or operate, any commercial motor vehicle(s) until 2005--0 ::00.

Report Prepared By:

WILLIAM MCCARDLE, JR

Badge #:

15101

Copy Received By:

WHITAKER, CHARLES B

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All violations listed on this report which are not designated as out-of-service MUST be corrected within 15 days OR before the vehicle's next trip, WHICHEVER OCCURS FIRST. If out of service violations are listed, they MUST be corrected in accordance with the out of service statement listed on this report.

RETURN ADDRESS: Sign and return this report ONLY if violations are entered in the violation section. Email or Mail it to the Pennsylvania State Police at the Address or Email listed in the upper left corner of this report.

DO NOT SEND TRAFFIC CITATIONS OR ANY PAYMENTS TO THIS ADDRESS. If issued, Citations MUST be returned to the COURT whose address appears on the top left of the citation.

For more information visit our web site at:

<http://cvsd.pa.gov>

MOTOR CARRIER CERTIFICATION: The undersigned certifies that all violations on this report have been corrected and action has been taken to ensure 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 and returned WITHIN 15 DAYS to the return address, as instructed above.

Signature of Carrier Official: X

Date: 6.24.22

Report Prepared By:

WILLIAM MCCARDLE, JR

Badge #:

15101

Copy Received By:

WHITAKER, CHARLES B

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