

California USA

COMMERCIAL
DRIVER LICENSE

FEDERAL
LIMITS
APPLY



DL **W1710365**

EXP **05/04/2025**

LN SINGH

FN JATINDER

851 S SUNSET AVE APT 30
WEST COVINA, CA 91790

DOB **04/10/1982**

RSTR E

CLASS A
LIMITED-TERM
END NONE



04101982

SEX M

HGT 5'-05"

HAIR BLK

WGT 150 lb

EYES BLK

ISS

DD 11/08/202361836/D2FD/29

02/07/2024





CLASS: A - Veh, Comb of Veh, No MC

ENDORSEMENTS: None

RESTRICTIONS: E/64-Class A/B-limited to vehicles with automatic transmission



This card is not acceptable for official federal purposes. This license is issued only as a license to drive a motor vehicle. It does not establish eligibility for employment, voter registration, or public benefits.

041082

Rev 08/29/2017
24038W17103650301



CALIFORNIA DEPARTMENT OF MOTOR VEHICLES
CUSTOMER RECEIPT COPY
DRIVER LICENSE/IDENTIFICATION CARD
INFORMATION REQUEST
02/27/24

DAK99933215K4W1710365
DATE:02-27-24*TIME:10:06*
DL/NO:W1710365*
B/D:04-10-1982*NAME:SINGH,JATINDER*
RES ADD AS OF 02-07-24:851 S SUNSET AVE APT 30, WEST COVINA 91790*
OTH ADD AS OF 10-27-23:851 S SUNSET AVE 30, WEST COVINA*
IDENTIFYING INFORMATION:
SEX:MALE*HAIR:BLACK*EYES:BLK*HT:5-05*WT:150*
LIC/ISS:02-07-24* EXP:05-04-25*CLASS:A COMMERCIAL*
ENDORSEMENTS:
NONE*
MEDICAL EXPIRES:11-17-25*
MEDICAL CERTIFICATE INFORMATION:
ISSUE DATE: 11-17-23 EXPIRATION DATE: 11-17-25
STATUS CODE: C
MED EXAMINER NUMBER: CA DC23838
MED REGISTRY NUMBER: 1871282863
SPECIALTY: CH MED EXAMINER PHONE NUMBER: 5599782465
MED EXAMINER NAME:
LAST NAME: HEBERT
FIRST NAME: LORENE
MED CERT RESTRICTIONS: NONE
SPE EFF DATE: NONE
DRIVER WAIVER TYPE: NONE
SELF CERTIFICATION INFORMATION:
SELF CERTIFICATION CODE: NI
RESTRICTIONS:
E-CLASS A/B-LIMITED TO VEHICLE WITH AUTOMATIC TRANSMISSION*
COMMERCIAL LICENSE STATUS:
VALID*
LICENSE STATUS:
VALID*
DEPARTMENTAL ACTIONS:
NONE*
CONVICTIONS:
NONE*
FAILURES TO APPEAR:
NONE*
ACCIDENTS:
NONE*

* * * END * * *

215-022724 E4 5404 DIR \$ 5.00

