U.S Department of Transportation Federal Motor Carrier

MOTOR CARRIER IDENTIFICATION REPORT (Application for U.S. DOT NUMBER)

Safety Administra		(Ob)	0-1-01				` '															
REASON FOR FIL		(Check BIENNIAL UF	Only One) Only One		□ οι	JT OF BU	SINE	SS NOTIF	ICATION		RE	APPLI	CATION	I (AFTER REV	OCATIO	N OF NE	V EN	TRANT)				
1. NAME OF MOTOR CARRIER									2. TRADE OR D.B.A. (DOING BUSINESS AS) NAME													
1. NAME OF MOTOR CARRIER RIVERA CARRIER INC										2. TRADE OR D.B.A. (DOING BOSINESS AS) INAINIE												
3. PRINCIPAL ADD 15125 WEST ROA	4. CITY HOUST	4. CITY HOUSTON				5. STATE/PROVINCE TEXAS					. ZIP CODE 7095	E + 4 7. COLONIA (MEXICO ONLY)			NLY)							
8. MAILING ADDR 15125 WEST ROA	9. CITY HOUST	9. CITY HOUSTON				10. STATE/PROVINCE TEXAS					1. ZIP CODE 7095	DE+4 12. COLONIA (MEXICO ONLY)										
13. PRINCIPAL BUS (832) 492-3140		14. PRINCIPAL CONTACT CELL (832) 492-3140				ONE NU	MBER				15. PRINCIPAL BUSINESS FAX NUMBER (832) 492-3140											
16. USDOT NO. 17. MC OR MX NO.					18. DUN & BRADSTREET NO.					X ID NC).											
2835600 MC948619										3109474	85		SSN#									
20. INTERNET E-M. indira@firstcallin		21. CARRIER MILEAGE (to nearest 10,000 miles for 70000									or Last 0	Last Calendar Year) YEAR 2016										
22. COMPANY OPE	ier B. Ir	ntrastate Ha	zmat Carrie		te Non	-Hazmat	t Car	rier D.	Intersta	te Hazn	nat Ship	per	E. Intr	astate Hazm	nat Ship	per F.	Vehi	cle Registr	ant Only			
23. OPERATION CL		`	Circle All tha	at Apply) ssengers (Busine																		
A. Authorized For-I		U. S. Mail J. Local Government																				
B. Exempt For-Hire	ssengers (Non-B	rs (Non-Business) H. F					rnment				K. Indian	Tribe										
Private Property	'		Migrant					I. State	Governr	ment				L. Other	_							
24. CARGO CLASS		,	cle All that	Apply)																		
A. GENERAL FREIGHT										P. GRAIN, FEED, HAY V. CO					RY BULK	BB	. CO	NSTRUCTIC	N			
B. HOUSEHOLD G. BUILDING K. LIQUIDS/GAS								Q. (. COAL/COKE V			W	. REFF	RIGERATED F	CC. WATER WELL							
GOODS C. METAL; SHEETS;	L. INT	L. INTERMODAL CONT.				R. MEAT X. BE					EVERAGES DD. OTHER MOTOR VEHICLES					-s						
COILS; ROLLS		S. (
(D.) MOTOR VEHICLE	i. ES	MACHINER LARGE OB.		N. OIL	FIELD	EQUIPME	ENT	T. l	U.S. MAIL			Z.	UTILI	TY								
E. DRIVE				O. LIV	ESTOC	K		U. (CHEMICA	LS		AA	A. FARI	M SUPPLIES								
AWAY/TOWAWAY 25. HAZARDOUS M	IATERIAL:	S CARRIED	OR SHIPE	PED (Circle All	that Ap	oply) C	-CAF	RRIED S	-SHIPPE	D B(B	ULK) - I	N CAF	RGO T	ANKS NB(N	NON-BU	ILK) - IN	PAC	KAGE				
C S A. DIV	S A. DIV 1.1 B NB C S K. DIV 2.2A (Ammonia) B N							U. DIV	4.2	В	NB	С	S EE. HR	RCQ B NB								
C S B. DIV		B NB	1	L. DIV 2.3A			NB		V. DIV		В			S FF. CL				B NB				
C S C. DIV		B NB B NB	1	M. DIV 2.3B N. DIV 2.3C			- 1	C S	W. DIV		B B	- 1		S GG .CL S HH .CL				B NB B NB				
					C S						S II. CLASS 9 B NB											
	F. DIV 1.6 B NB C S P. Class 3 B NB C					C S	S Z. DIV 6.1A B NB C					S JJ. ELEVATED TEMP MAT. B NB										
													C S KK. INFECTIOUS WASTE B NB									
C S H. DIV 2.1 LPG B NB C S R. Class 3B B C S I. DIV 2.1 (Methane) B NB C S S. COM LIQ B								C S					S LL. MARINE POLLUTANTS B NB S MM. HAZARDOUS SUB(RQ) B NB									
C S J. DIV 2.2 B NB C S T. DIV 4.1								C S			В	NB	C			US WAS		B NB				
												С	S 00 . OR		B NB							
26. NUMBER OF VE			BE OPERA Trailers	Hazmat Cargo		oot Co	_	Motor	School Bus			Mini-bus		Va	an		Limousine					
	Straight Trucks	Truck Tractors			Hazmat Car Tank Traile			Coach		Numbe	r of vehicles carryi		rrving 1	number of pas	cengere	(including	the	driver) belov	137			
				Tank Trucks					1-8	9-15	16+	16		1-8	9-1		_	9-15	16+			
OWNED	1			1																		
TERM LEASED TRIP LEASED							-															
27. DRIVER INFOR	MATION			INTERSTATE		IN	TRAS	STATE	'		TOTA	L DRI	VERS			TOTAL	CDI	L DRIVERS	3			
Within 1				0					1	1 1												
Beyond 28. IS YOUR U.S. DOT	100-Mile F		ON CURREN	ITI V DEVOKED E	1	FEDERA	. MO	TOD CAD	O CAI	ETV AD	MINIETE	ATION	10			V.		NI-	v			
If Yes, enter your			ON CURREN	NILT REVOKED E)	FEDERA	L IVIO	TOR CAR	KIEK SAI	-EIT AD	——	ATION	ır			Ye	es	No	Χ			
29. PLEASE ENTER N	IAME(S) OF	SOLE PROP	RIETOR(S),	OFFICERS OR PA	ARTNE	RS AND 1	ΓITLE	S (e.g. PR	ESIDENT	, TREAS	URER, C	SENER	AL PAF	RTNER, LIMIT	ED PAR	TNER)						
1. FERNANDO		OWNER/OP Please print							2(Please print Name)													
30. CERTIFICATION S	TATEMEN	Γ (to be comp	leted by an	authorized officia	ıl)																	
I, RIVERA CARI		Please print I	Name)			Under pe	enaltie	es of perjui						lations and/or this report is,								
Signature RIVER	omplete. 6/2017	nplete.																				