



Welcome, Kim Thursby. You are logged on with a role of CHAZ_USER. [\[Sign Out\]](#)

[\[Pending List\]](#) [\[Completed List\]](#)

[\[Completed List - this DocLog\]](#)

Completed Document Details

NATIVE NAME: THOMPSON CARRIERS INC

DOC LOG ID: 41457

CHAZ ID: ALR000058206

CITY: OPELIKA

COUNTY: ALL FL CNTYS

[View email records](#)

[RUOH Email Template](#) [RUOH Approvals](#)

Document Types

Document Type

RUOH

Primary Type

Y

Discontinued On

Email Addresses

Affiliation-ID	Interest Type	Email	Native ID	Native Name
432391	UOP	bubbaallison@thompsoncarriers.com	ALR000058206	Thompson Carriers Inc

Processes

Document Type	Process	Date	Author	Delete
RUOH	Logged	08/31/2018	SIMMONS_JLS	✕
RUOH	Completeness Review	09/04/2018	ASHWOOD_J	✕
RUOH	Waiting for information	09/04/2018	ASHWOOD_J	✕
RUOH	Ready for Data Entry	09/10/2018	ASHWOOD_J	✕
RUOH	Data Entry Completed	09/10/2018	ASHWOOD_J	✕
RUOH	Final Review	09/10/2018	ASHWOOD_J	✕
RUOH	Notification Letter Emailed	09/17/2018	ASHWOOD_J	✕
RUOH	Booked into Oculus	09/18/2018	THURSBY_K	✕

Comments

Document Type	Date	Comment	Author
General Comment	08/31/2018	Insurance form has an original signature.	SIMMONS_JLS
RUOH	09/10/2018	Received original Combined HWT/UO Insurance form - Good.	ASHWOOD_J
RUOH	09/17/2018	Received original 8700 for, registration fee, training manual statement, Annual Report and ACORD form. Insurance on file is current.	ASHWOOD_J

[DEP Home](#) | [About DEP](#)