

CONCRETE ENTERPRISES, LLC.

APPLICATION FOR EMPLOYMENT

THE AGE DISCRIMINATION IN EMPLOYMENT ACT OF 1967 PROHIBITS DISCRIMINATION ON THE BASIS OF AGE WITH RESPECT TO INDIVIDUALS WHO ARE AT LEAST 40 BUT LESS THAN 70 YEARS OF AGE.

I UNDERSTAND THAT THE INFORMATION IN THIS APPLICATION WILL BE USED AND THAT PRIOR EMPLOYERS WILL BE CONTACTED FOR PURPOSES OF INVESTIGATION AS REQUIRED BY 391.23 OF THE FEDERAL MOTOR CARRIER SAFETY REGULATIONS.

I UNDERSTAND THAT THE INFORMATION IN THIS APPLICATION MAY BE CHECKED THROUGH THE CREDIT BUREAU OF SOUTHWEST GEORGIA.

NAME: _____ S.S.# _____

(FIRST) (MIDDLE) (LAST)

ADDRESS:

(STREET) (CITY) (STATE) (ZIP CODE)

HOW LONG? _____ PHONE# _____ MOBILE # _____

EMAIL: _____

MAILING ADDRESS:

(STREET) (CITY) (STATE) (ZIP CODE)

IN CASE OF AN EMERGENCY NOTIFY:

(NAME) (PHONE NUMBER) (RELATIONSHIP)

(STREET) (CITY) (STATE) (ZIP CODE)

RELATIVES OR FRIENDS EMPLOYED BY THIS COMPANY:

NAME(S) RELATIONSHIP

PHYSICAL HISTORY

HAVE YOU EVER BEEN GRANTED A WAIVER UNDER SECTION 391.49 OF THE FEDERAL MOTOR CARRIER SAFETY REGULATIONS PERTAINING TO THE LOSS OF FOOT, LEG, HAND OR ARM? _____

DATE OF LAST DOT PHYSICAL EXAMINATION _____

DOT PHYSICAL EXIRES: _____

EMPLOYMENT RECORD

LAST EMPLOYER: _____ PHONE# _____

ADDRESS _____

POSITION HELD _____ FROM _____ TO _____

RATE OF PAY: _____ PER: HOUR / DAY / WEEK / LOAD / MILE

REASON FOR LEAVING _____

2nd LAST EMPLOYER: _____ PHONE# _____

ADDRESS _____

POSITION HELD _____ FROM _____ TO _____

RATE OF PAY: _____ PER: HOUR / DAY / WEEK / LOAD / MILE

REASON FOR LEAVING _____

3rd LAST EMPLOYER: _____ PHONE# _____

ADDRESS _____

POSITION HELD _____ FROM _____ TO _____

RATE OF PAY: _____ PER: HOUR / DAY / WEEK / LOAD / MILE

REASON FOR LEAVING _____

EDUCATION

CIRCLE HIGHEST GRADE COMPLETED:

LAST SCHOOL ATTENDED

HIGH SCHOOL: 1 2 3 4 COLLEGE: 1 2 3 4

GENERAL

HAVE YOU EVER WORKED FOR THIS COMPANY UNDER ANOTHER NAME? _____

EXPERIENCE AND QUALIFICATIONS – DRIVER

DRIVER LICENSES (ANY HELD IN PAST THREE YEARS MUST BE SHOWN)

STATE _____ LICENSE NO. _____ TYPE _____ EXPIRATION DATE _____

TRAFFIC CONVICTIONS AND FORFEITURES FOR THE PAST THREE YEARS

LOCATION DATE CHARGE PENALTY

HAVE YOU EVER BEEN DENIED A LICENSE, PERMIT OR PRIVILEGE TO OPERATE A MOTOR VEHICLE? _____

HAS ANY LICENSE, PERMIT OR PRIVELGE EVER BEEN SUSPENDED OR REVOKED? _____

HAVE YOU EVER BEEN DISQUALIFIED SUBJECT TO SECTION 391 OF THE FEDERAL MOTOR CARRIER SAFETY REGULATIONS? _____

IF YOU ANSWERED YES TO ANY OF THESE, GIVE DETAILS: _____

DRIVING EXPERIENCE

TYPE OF EQUIPMENT

CLASS OF EQUIPMENT (VAN, TANK, FLAT, ETC.) FROM - TO

STRAIGHT TRUCK TRACTOR & SEMI-TRAILER

TRACTOR-TWO TRAILER OTHER

LIST ALL TRAFFIC ACCIDENTS DURING THE LAST 3 YEARS:

ANSWER YES OR NO

ARE YOU PHYSICALLY ABLE TO LIFT SIXTY (60) POUNDS? _____

DO YOU HAVE A RELIABLE MEANS OF TRANSPORTATION? _____

This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge.

Applicant's Signature

Date

CONCRETE ENTERPRISES, LLC.

CONTROLLED SUBSTANCE TESTING CONSENT FORM

As a condition of employment by Concrete Enterprises, LLC., you must submit to a pre-employment controlled substance screening test. In order to be employed by Concrete Enterprises, LLC., you must also successfully pass this screening test. In order to remain employed by Concrete Enterprises, LLC., you must continue to pass controlled substance screening tests, whether administered for specific causes, reasonable suspicion or at random. Your refusal to submit at any time to the screening tests described in this consent form will subject you to disciplinary action, up to and including immediate termination of employment.

By signing this form, you are acknowledging that you consent to such screening tests, that you consent to the release of the test results to Concrete Enterprises' authorized representatives, and that you understand that such screening tests are a part of Concrete Enterprises hiring policy and ongoing employment policy.

I, (*print full name*) _____
voluntarily agree and consent to the giving of a urine specimen between business hours of the day sent to be tested to determine the presence of controlled substances as a condition of pre-employment. If employed, I also voluntarily agree and consent to the giving of urine specimens to be tested to determine the presence of controlled substances as a condition of continued employment. I further understand that the controlled substance urine tests, given as a condition of employment, may be administered for specific causes, reasonable suspicion or at random.

Furthermore, I agree to Concrete Enterprises policy concerning the expense of such pre-employment tests, which is that I will be responsible for the expense of the controlled substance screening tests at the time of the test. I understand that after a three month period of employment, I can be reimbursed for the controlled substance screening test with proof of a receipt.

Furthermore, I authorize the release of these results to Concrete Enterprises, LLC. and its authorized representatives.

I agree to release Concrete Enterprises, LLC., for any and all liability or responsibility related to the administration of the testing, testing procedure, or any act of omission arising therefrom or related thereto.

Consent Signature

Date

PAST EMPLOYMENT VERIFICATION

Sent to: _____ Fax Number: _____
Previous Employer

Requested by: **Company Name:** Concrete Enterprises, LLC. **Phone:** 229-888-1904
Company Address: 801 Turner Field Rd Albany, GA **Fax:**

Name of Applicant: _____ Social Security #: _____

Job Title: _____ Hire Date: _____

Termination Date: _____ Resigned: Yes _____ No _____ Discharged: Yes _____ No _____

If Discharged, why? _____

Eligible for Rehire? Yes _____ No _____ Upon Review _____ If No, please explain: _____

Equipment: Type of Tractor/Truck: _____ Trailer Length: _____

Refrigerated _____ Flatbeds _____ Vans _____ Tanker _____ Other _____

Commodities Hauled: _____

Areas of Operation: _____

Overall Performance: Poor _____ Fair _____ Good _____ Excellent _____

Accident information below requested in accordance with FMCSR Part 391.23. (Accidents within last 36 months.)

Accidents: # Preventable: _____ Description: _____

Non-Preventable: _____ Description: _____

Drug/Alcohol information below requested in accordance with DOT 49 CFR Part 40. (Tests done in last 36 months.)

Tested positive for controlled substance in last 3 years? Yes _____ No _____

Had a breath alcohol test result with a concentration of .04 or greater in the last 3 years? Yes _____ No _____

Ever refused a required test for drugs or alcohol in the last 3 years? Yes _____ No _____

Violated other D.O.T. drug/alcohol regulations? Yes _____ No _____

Have you received information from a previous employer that this individual has violated D.O.T. drug/alcohol regulations? Yes _____ No _____

If Yes, please give type of test, date of test, and SAP information (if applicable): _____

Person Providing Information

Title

1.) I hereby authorize the above-mentioned employer/school to release all information as to my character, work habits, performance, experience, fitness, together with reasons for termination concerning my employment to Concrete Enterprises, LLC. _____ (or their authorized agents) which may request such information in connection with my application for employment with Concrete Enterprises, LLC.

2.) In conformity with 49 CFR part 40, I hereby authorize the above-mentioned employer/school and their agents to furnish Concrete Enterprises, LLC. the above-requested information concerning D.O.T. drug and alcohol tests including pre-employment tests during the previous 3 years; the dates when I tested positive; the dates when I tested .04 or greater; the dates when I refused (including a verified adulterated or substituted result) to be tested for drugs and alcohol; and any other violations of 49 CFR part 40 and any information the above-mentioned employer/school and/or their authorized agents have received regarding violations of 49 CFR part 40 from my previous employers covered by D.O.T.

3.) I hereby release the above-mentioned employer/school and their authorized agents from any and all liability of any type as a result of providing the above-requested information to Concrete Enterprises, LLC.

By signing below, I certify that I have read and fully understand Parts 1, 2, and 3 of this release and that I executed this release voluntarily, with the knowledge that any and all information released could affect my being employed with Concrete Enterprises, LLC.

It is expressly acknowledged, understood and agreed that the information provided by the applicant regarding the applicant's employment during the previous three (3) years in accordance with Section 391.21(b)(10) of the Federal Motor Carrier Safety Regulations ("FMCSR") may be used, and the applicant's prior employers may be contacted, for the purpose of investigating the applicant's safety performance history information as required by paragraphs (d) and (e) of Section 391.23 of the FMCSR. The applicant has certain due process rights under the FMCSR regarding the information received as a result of these investigations, as described below.

Applicant's Due Process Rights: 1) The right to review information provided by previous employers; 2) The right to have errors in the information corrected by the previous employer and for that previous employer to re-send the corrected information to Concrete Enterprises, LLC. _____; and 3) The right to have a rebuttal statement attached to the alleged erroneous information, if the previous employer and the driver cannot agree on the accuracy of the information.

Drivers who have previous Department of Transportation regulated employment history in the preceding three years, and wish to review previous employer-provided investigative information, must submit a written request to the Safety Compliance Manager of Concrete Enterprises, LLC. _____, which may be done at any time, including when applying, or as late as thirty (30) days after being employed or being notified of denial of employment. Concrete Enterprises, LLC. _____ will provide this information to the applicant within five (5) business days after receiving the written request. If, however, Concrete Enterprises, LLC. _____ has not yet received the requested information from the previous employer(s), then it will provide the information to the applicant within five (5) business days after it receives the requested safety performance history information. If the driver has not arranged to pick up or receive the requested records within thirty (30) days of Concrete Enterprises, LLC. _____ making them available, Concrete Enterprises, LLC. _____ will consider the driver to have waived the request to review the records.

Applicant's Signature

Date

Applicant's Printed Name

Witness

Applicant: only sign highlighted areas at bottom of page



Disclosure And Authorization For Consumer Reports

Disclosure

In connection with my application for employment (including contract or volunteer services) or application for tenancy with _____, at _____, I understand consumer reports will be requested by you ("Company"). These reports may include, as allowed by law, the following types of information, as applicable: names and dates of previous employers, reason for termination of employment, work experience, reasons for termination of tenancy, former landlords, education, accidents, licensure, credit, etc. I further understand that such reports may contain public record information such as, but not limited to: my driving record, judgments, bankruptcy proceedings, evictions, criminal records, etc., from federal, state, and other agencies that maintain such records.

In addition, investigative consumer reports (gathered from personal interviews, as applicable, with former employers or landlords, past or current neighbors and associates of mine, etc.) to gather information regarding my work or tenant performance, character, general reputation and personal characteristics, and mode of living (lifestyle) may be obtained.

Authorization

I hereby authorize procurement of consumer report(s) and investigative consumer report(s) by Company. If hired (or contracted), this authorization shall remain on file and shall serve as ongoing authorization for Company to procure such reports at any time during my employment, contract, or volunteer period. I authorize without reservation, any person, business or agency contacted by the consumer reporting agency to furnish the above-mentioned information.

This authorization is conditioned upon the following representations of my rights:

I understand that I have the right to make a request to the consumer reporting agency: Background Screeners of America ("Agency"), 18344 Oxnard Street, Ste. 101, Tarzana, CA 91356, telephone number 866-570-4949, upon proper identification, to obtain copies of any report furnished to Company by the Agency and to request the nature and substance of all information in its files on me at the time of my request. The request includes the sources of information and the Agency, on Company's behalf, to provide a complete and accurate disclosure of the nature and scope of the investigation covered by any investigative consumer report(s). The Agency will also disclose the recipients of any such reports on me which the Agency has previously furnished within the two year period for employment requests, and one year for other purposes preceding my request (California three years). I hereby consent to Company obtaining the above information from the Agency. I understand that I can dispute, at any time, any information that is inaccurate in any type of report with the Agency. I may view the Agency's privacy policy at their website: www.wescreenusa.com

California, Minnesota and Oklahoma Residents:

I understand that if the Company is located in California, Minnesota or Oklahoma, that I have the right to request a copy of any report Company receives on me at the time the report is provided to Company. By checking the following box, I request a copy of all such reports be sent to me. Check here:

I have read and I understand this page. Applicant Initials

California Applicants:

As a California applicant, I understand that I have the right under Section 1786.22 of the California Civil Code to contact the Agency during reasonable hours (9:00 a.m. to 5:00 p.m. (PTZ) Monday through Friday) to obtain all information in Agency's file for my review. I may obtain such information as follows: 1) In person at the Agency's offices, which address is listed above. I can have someone accompany me to the Agency's offices. Agency may require this third party to present reasonable identification. I may be required at the time of such visit to sign an authorization for the Agency to disclose to or discuss Agency's information with this third party; 2) By certified mail, if I have previously provided identification in a written request that my file be sent to me or to a third party identified by me; 3) By telephone, if I have previously provided proper identification in writing to Agency; and 4) Agency has trained personnel to explain any information in my file to me and if the file contains any information that is coded, such will be explained to me.

New York Applicants:

I understand that if I am applying for employment in New York, that I have the right to receive a copy of Article 23-A of the New York Correction Law _____(initial if this applies).

Washington Applicants:

I understand that if the report is provided to an employer in the State of Washington, that I can contact the following office for more information regarding my rights under Washington state law in regard to these reports: State of Washington Attorney General, Consumer Protection Division, 800 5th Ave, Ste. 2000, Seattle, Washington 98104-3188, (206) 464-7744.

Please complete all of the fields below:

I understand that I have rights under the Fair Credit Reporting Act and I acknowledge receipt of the Summary of Rights.

Last Name:		First:		Middle: Please check box if you do not have a middle name. <input type="checkbox"/>	
Social Security #:			Date of Birth:		
Email: (This is a required Field)					
Current Address:			Previous Address:		
Street:			Street:		
Apt or Unit #:			Apt or Unit #:		
City:		State:	City:		State:
Zip:			Zip:		
Drivers Lic. #:			State Issuing:		
Former Name/Alias:					

X _____
Applicant Signature

Date: _____

Para informacion en espanol, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA.

For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.
- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567-8688.
- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

Applicant Copy

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

TYPE OF BUSINESS:	CONTACT:
1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates. b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the Bureau:	a. Bureau of Consumer Financial Protection 1700 G Street NW Washington, DC 20006 b. Federal Trade Commission: Consumer Response Center - FCRA Washington, DC 20580 (877) 382-4357
2. To the extent not included in item 1 above: a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and insured state branches of foreign banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations d. Federal Credit Unions	a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050 b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480 c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106 d. National Credit Union Administration Office of Consumer Protection (OCP) Division of Consumer Compliance and Outreach (DCCO) 1775 Duke Street Alexandria, VA 22314
3. Air carriers	Asst. General Counsel for Aviation Enforcement & Proceedings Department of Transportation 400 Seventh Street SW Washington, DC 20590
4. Creditors Subject to Surface Transportation Board	Office of Proceedings, Surface Transportation Board Department of Transportation 1925 K Street NW Washington, DC 20423
5. Creditors Subject to Packers and Stockyards Act	Associate Deputy Administrator for Capital Access United States Small Business Administration 406 Third Street, SW, 8th Floor Washington, DC 20416
6. Small Business Investment Companies	Associate Deputy Administrator for Capital Access United States Small Business Administration 406 Third Street, SW, 8th Floor Washington, DC 20416
7. Brokers and Dealers	Securities and Exchange Commission 100 F St NE Washington, DC 20549
8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations	Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090
9. Retailers, Finance Companies, and All Other Creditors Not Listed Above	FTC Regional Office for region in which the creditor operates or Federal Trade Commission: Consumer Response Center - FCRA Washington, DC 20580 (877) 382-4357

Applicant Copy