

# Preliminary Driver Application

Company: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Date: \_\_\_\_\_ Location: \_\_\_\_\_

## Driver Information

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ SS#: \_\_\_\_\_

DL#: \_\_\_\_\_ Exp Date: \_\_\_\_\_ Email Address: \_\_\_\_\_

## Employment History

please provide employment history for the past three (3) years

Employer: \_\_\_\_\_ Position: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Employer: \_\_\_\_\_ Position: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Employer: \_\_\_\_\_ Position: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

## Driving Record

Describe your driving experience and equipment operated

\_\_\_\_\_  
\_\_\_\_\_

Describe any violations that you have on your driving record

\_\_\_\_\_  
\_\_\_\_\_

### INDEMNITY AGREEMENT and FURTHER CONSENT AND RIGHTS

For VALUE RECEIVED, the undersigned jointly and severally agreed to indemnify and save harmless The Dumont Company (Indemnities) and their successors and assigns, from any claim, action, liability, loss, damage or suit, arising from participation in observations and worksite visitation, either while serving as a passenger in a company vehicle, on a worksite or on company premises in any other activities intended, or not intended, to provide the applicant opportunities to experience actual work and functions desired to be performed on a basis for employment decisions. In the event of any asserted playing, the Indemnities shall provide the undersigned reasonably timely written notice of same, and there after the undersigned show at its own expense defend, protect, and save harmless Indemnities against said claim or any loss or liability they're under. In the further event the undersigned shall fail to so defend and/or indemnify and save harmless, then in such instance the Indemnities shall have full rights to defend, pay or settle said claim on their own behalf without notice to undersigned and with full rights to recourse against the undersigned for all fees, costs, expenses and payments made or agreed to be paid to discharge said claim. Upon default, the undersigned further agree to pay all reasonable attorney's fees necessary to enforce this agreement. This agreement shall be unlimited as to amount or duration. This agreement shall be binding upon and inure to the benefit of the parties, their successors, assigns and personal representatives.

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. I also agree that falsified information or significant omissions may result in my disqualification now or at any time.

In connection with my application for qualification with The Dumont Company, I understand that and investigative consumer report will be requested that will include information as to my character, credit history, work habits, performance, experience, drug and alcohol test results, driving record and experience, as well as any reason for termination of my qualifications including any results from previous employers. Further, I understand that you will be requesting information concerning my driving record and or information from various state agencies which maintain records concerning credit record, criminal history, traffic offenses and accidents, as well as information concerning my previous driving record request made by others from such state agencies. I hereby authorize The Dumont Company to obtain the above described information, and agree that such information, and my employment history with you if I am qualified, will be supplied to other companies which subscribe to consumer reporting services.

In accordance with sections 382.405, 382.413 and 391.23 of the Federal Motor Carrier Safety Regulations, I authorize any and all persons and or institutions to provide any relevant information, including my alcohol and controlled substance testing/training, that may be required to complete my qualification and I agree to release them from any and all liability for supplying said information.

Finally, prospective employers are required to notify driver applicants of their due process rights as specified in §391.23(i) regarding the information received as part of the background investigation. In accordance with section (i)(1), I understand my right to be expressly notified with Department of Transportation regulated employment during the preceding three years – via the application form or other written document prior to any hiring decision that I have the following rights regarding the investigative information that will be provided

(i)(1)(i) The right to review information provided by these employers;

(i)(1)(ii) The right to have errors in the information corrected by the previous employer and for that previous employer to resend the corrected information;

(i)(1)(iii) The right to have a rebuttal statement attached to the alleged erroneous information, if the previous employer and the driver cannot agree

(i)(2) 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 prospective employer, which may be done at any time, including when applying, or as late as 30 days after being employed or being notified of denial of employment. The prospective employer must provide this information to the applicant within five (5) business days of receiving the written request. If the prospective employer has not yet received the requested information from the previous employer(s), then the 5 business days-deadline will begin when the perspective carrier may consider the driver to have waived his/her request to review the records.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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