

Dutcher-Phipps Crane & Rigging Co. Inc.

P.O. Box 910, Monahans, TX 79756

EMPLOYMENT APPLICATION

AN EQUAL OPPORTUNITY EMPLOYER

PLEASE PRINT

<input type="checkbox"/> DRIVING POSITION	Position Applying For	Day Phone Number	Home Phone
<input type="checkbox"/> NON - DRIVING <input type="checkbox"/> COMMERCIAL DRIVER'S LICENSE			
FULL NAME (Last, first, middle)			

Date of Application
Social Security #

Current Address	City, State, Zip Code	How long?
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Previous Address	City, State, Zip Code	How long?
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Do you have the legal right to accept permanent employment in the U.S.	<input type="checkbox"/> YES <input type="checkbox"/> NO	IF NO, EXPLAIN
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Have you been convicted of a felony within the last 7 years?	<input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, EXPLAIN (Conviction is not an absolute bar to employment.)
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Were you previously employed by us?	<input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, when and what position?
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Are you subject to any employment agreement, contract, restriction, or legal impediment which may affect your employment?	<input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, EXPLAIN
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Are you capable of performing in a reasonable manner activities involved in this job or occupation?	<input type="checkbox"/> YES <input type="checkbox"/> NO	IF NO, EXPLAIN (A description of the activities involved is available from the hiring supervisor)
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Education

LIST SCHOOLS / COLLEGES	LOCATION	DATES ATTENDED

Professional and Personal References

NAME	ADDRESS	PHONE NUMBER

List your last or current employer first. Include any unpaid or volunteer work and military service. Account for any lapses in time.

Applicant must account for minimum 3 years, CDL drivers must account for 10 years.

[illegible]

May we contact the employers listed above? _____

Use additional paper if necessary.

ADDITIONAL QUALIFICATIONS

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LICENSE NO.

DRIVERS LICENSE INFORMATION		
LICENSE NO	STATE	EXPIRATION DATE
		DATE OF BIRTH

DESCRIBE LICENSE RESTRICTIONS

HAS YOUR LICENSE EVER BEEN REVOKED?	[] YES [] NO	IF YES, EXPLAIN	DATE	CITATIONS RECEIVED?

[illegible]

VEHICLE AND DRIVER'S LICENSE INFORMATION CONTINUED

I authorize **Dutcher-Pypps Crane & Rigging Co. Inc.** to obtain my driving record from the state department of motor vehicles, for the purpose of hiring, promotions, and terminations.

AUTHORIZATION		SIGNATURE		DATE
TRAFFIC VIOLATIONS		DATE	LOCATION	DESCRIPTION
LIST CITATIONS FOR LAST 3 YEARS				

DRIVING EXPERIENCE				
CLASS OF EQUIPMENT	TYPE OF EQUIPMENT (VAN, TANK, FLAT, ETC.)	FROM	DATES TO	APPROXIMATE NUMBER OF MILES (TOTAL)
STRAIGHT TRUCK				
TRACTOR & SEMI-TRAILER				
TRACTOR - 2 TRAILERS				
OTHER				
EMERGENCY CONTACT	NAME	PHONE ()	ADDRESS	

APPLICANTS STATEMENT

I certify that all the information given by me is true and complete to the best of my knowledge. I understand that any falsification or omission of this or other information concerning my suitability for employment may result in my immediate dismissal.

I understand that if I am hired, my employment will be for no definite period and is terminable at-will by either the Company or myself. I understand that no representative of the Company has any authority to enter into an agreement for employment for a specified period of time, or change in any other way the at-will status of my employment, either prior to commencement of my employment or after I have been employed.

I voluntarily authorize investigation of all information contained in this application or such other personal, educational, or employment related matters as the Company deems necessary. I hereby release all employers, schools, individuals, or any other organization from all liability that may result from investigating such information.

I understand that I am required to abide by all rules and regulations of the Company. I acknowledge that these policies and procedures, and any benefits or other terms and conditions of employment, may be changed, interpreted, withdrawn, or added to by the Company at any time without prior notice to me.

I grant the Company the right and privilege to withhold, retain, and/or deduct an amount up to and including the total amount of any indebtedness, advances, charges for personal purchase on Company accounts, or any other amounts owed to **Dutcher-Pypps Crane & Rigging Co. Inc.** or any of its affiliates, subsidiaries, or divisions, from any salary, wages, commissions, or any other debt owed by me to the Company.

SIGNED _____

APPLICANT - DO NOT WRITE ON THIS PAGE

INTERVIEWER make sure all relative information is complete on pages 1 through 3.

DATE	INTERVIEWER	COMMENTS

REFERENCE CHECK RESULTS

1	
2	
3	

EMPLOYMENT REFERENCE VERIFICATION

PREVIOUS EMPLOYER #1	PHONE NUMBER	VERIFIED BY	TITLE
VERIFY EMPLOYMENT INFORMATION	DATES	POSITION	SALARY
ADDITIONAL COMMENTS			REASON / LEAVING
			REHIRABLE?

PREVIOUS EMPLOYER #2	PHONE NUMBER	VERIFIED BY	TITLE
VERIFY EMPLOYMENT INFORMATION	DATES	POSITION	SALARY
ADDITIONAL COMMENTS			REASON / LEAVING
			REHIRABLE?

PREVIOUS EMPLOYER #3	PHONE NUMBER	VERIFIED BY	TITLE
VERIFY EMPLOYMENT INFORMATION	DATES	POSITION	SALARY
ADDITIONAL COMMENTS			REASON / LEAVING
			REHIRABLE?

PREVIOUS EMPLOYER #4	PHONE NUMBER	VERIFIED BY	TITLE
VERIFY EMPLOYMENT INFORMATION	DATES	POSITION	SALARY
ADDITIONAL COMMENTS			REASON / LEAVING
			REHIRABLE?

OTHER QUESTIONS TO ASK PREVIOUS EMPLOYERS SHOULD INCLUDE WORK HABITS, TARDINESS, HIS/HER WILLINGNESS TO COMPLY WITH COMPANY POLICY, ABILITY TO GET ALONG WITH CO-WORKERS AND ABILITY TO GET ALONG WITH SUPERVISORS. SUPERVISOR, MAIL OR FAX "INQUIRY TO PAST EMPLOYERS" FORM IF UNABLE TO VERIFY BY PHONE.

NEXT STEP

ACCEPTABLE APPLICANTS MUST QUALIFY FOR EMPLOYMENT BASED ON THIS COMPANY'S EMPLOYMENT REQUIREMENTS.

	DRUG TEST	DMV REPORT	INSURABILITY	PHYSICAL AGILITY	OTHER
DATE					

COMPLETE HIRING PROCESS RELATED DOCUMENTS. START EMPLOYEE SAFETY AND WORK RELATED TRAINING!

DISCLOSURE AND AUTHORIZATION FORM

Dutcher Phipps Crane and Rigging Co (the "Company") may request, for lawful employment purposes, background information about you from a consumer reporting agency in connection with your employment or application for employment (including independent contractor assignments, as applicable). This background information may be obtained in the form of consumer reports and/or investigative consumer reports (commonly known as "background reports"). These background reports may be obtained at any time after receipt of your authorization and, if you are hired or engaged by the Company, throughout your employment or your contract period.

HireRight, Inc., or another consumer reporting agency, will prepare or assemble the background reports for the Company. HireRight, Inc. is located and can be contacted by mail at 5151 California, Irvine, CA 92617, and HireRight can be contacted by phone at (800) 400-2761.

The types of information that may be obtained include, but are not limited to: social security number verifications; address history; credit reports and history; criminal records and history; public court records; driving records; accident history; worker's compensation claims; bankruptcy filings; educational history verifications (e.g., dates of attendance, degrees obtained); employment history verifications (e.g., dates of employment, salary information, reasons for termination, etc.); personal and professional references checks; professional licensing and certification checks; drug/alcohol testing results, and drug/alcohol history in violation of law and/or company policy; and other information bearing on your character, general reputation, personal characteristics, mode of living and credit standing.

This information may be obtained from private and public record sources, including, as appropriate: government agencies and courthouses; educational institutions; former employers; personal interviews with sources such as neighbors, friends and associates; and other information sources. If the Company should obtain information bearing on your credit worthiness, credit standing or credit capacity for reasons other than as required by law, then the Company will use such credit information to evaluate whether you would present an unacceptable risk of theft or other dishonest behavior in the job for which you are being evaluated.

You may request more information about the nature and scope of any investigative consumer reports by contacting the Company. A summary of your rights under the Fair Credit Reporting Act is also being provided to you.

ADDITIONAL STATE LAW NOTICES

If you are a California, Maine, Massachusetts, New York or Washington State applicant, employee or contractor, please also note:

CALIFORNIA: Pursuant to section 1786.22 of the California Civil Code, you may view the file maintained on you by HireRight during normal business hours. You may also obtain a copy of this file, upon submitting proper identification and paying the costs of duplication services, by appearing at HireRight's offices in person, during normal business hours and on reasonable notice, or by mail. You may also receive a summary of the file by telephone, upon submitting proper identification. HireRight has trained personnel available to explain your file to you, including any coded information. If you appear in person, you may be accompanied by one other person, provided that person furnishes proper identification.

MAINE: You have the right, upon request, to be informed of whether an investigative consumer report was requested, and if one was requested, the name and address of the consumer reporting agency furnishing the report. You may request and receive from the Company, within five business days of our receipt of your request, the name, address and telephone number of the nearest unit designated to handle inquiries for the consumer reporting agency issuing an investigative consumer report concerning you. You also have the right, under Maine law, to request and promptly receive from all such agencies copies of any such reports.

MASSACHUSETTS: If we request an investigative consumer report, you have the right, upon written request, to a copy of the report.

NEW YORK: You have the right, upon request, to be informed of whether or not a consumer report was requested. If a consumer report is requested, you will be provided with the name and address of the consumer reporting agency furnishing the report. You may inspect and receive a copy of the report by contacting that agency. Please click [here](#) for additional information about New York law, as applicable.

WASHINGTON STATE: If the Company requests an investigative consumer report, you have the right, upon written request made within a reasonable period of time after your receipt of this disclosure, to receive from the Company a complete and accurate disclosure of the nature and scope of the investigation requested by the Company. You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.

Authorization of Background Investigation

I have carefully read and understand this Disclosure and Authorization form and the attached summary of rights under the Fair Credit Reporting Act. By my signature below, I consent to preparation of background reports by a consumer reporting agency such as HireRight, Inc., and to the release of such background reports to the Company and its designated representatives and agents, for the purpose of assisting the Company in making a determination as to my eligibility for employment (including independent contractor assignments, as applicable), promotion, retention or for other lawful employment purposes. I understand that if the Company hires me or contracts for my services, my consent will apply, and the Company may obtain background reports, throughout my employment or contract period.

I understand that information contained in my employment or contractor application, or otherwise disclosed by me before or during my employment or contract assignment, if any, may be used for the purpose of obtaining and evaluating background reports on me. I also understand that nothing herein shall be construed as an offer of employment or contract for services.

I hereby authorize law enforcement agencies, learning institutions (including public and private schools and universities), information service bureaus, credit bureaus, record/data repositories, courts (federal, state and local), motor vehicle records agencies, my past or present employers, the military, and other individuals and sources to furnish any and all information on me that is requested by the consumer reporting agency.

By my signature below, I also certify the information I provided on and in connection with this form is true, accurate and complete. I agree that this form in original, faxed, photocopied or electronic (including electronically signed) form, will be valid for any background reports that may be requested by or on behalf of the Company.

Applicant Last Name _____ First _____ Middle _____

Applicant Signature _____ Date _____

DRUG TEST CONSENT AGREEMENT

DATE: _____

I voluntarily consent to a DOT UA testing by a doctor, medical center, hospital, laboratory or medically qualified personnel.

I also voluntarily consent to a rapid test before starting any orientation.

Furthermore, I release Dutcher-Phipps Crane & Rigging Co. from any liability incurred from this testing requirement.

I understand that I will not be considered an employee until the company receives the test results back.

PRINTED NAME: _____ DATE: _____

SSN: _____

WITNESS: _____ DATE: _____