ATTENTION CDL APPLICANTS

Please review the company requirements for CDL Drivers prior to making application.

The following criteria is based on Federal Motor Carrier Safety Regulations is being adopted as a standard by Sunset Materials, Inc. for all CDL Driver prospective new hires.

Prospective employees wishing to obtain employment as a CDL Driver with Sunset Materials, Inc. are required to furnish a Drivers Abstract from the Department of Licensing. The Abstract needs to have a printed date that is within 30 days from the day of application.

On an annual basis throughout employment each driver will be required to sign an Abstract Release form allowing Sunset Materials, Inc., to obtain records in order to perform reviews required by the Washington State Patrol.

No Record of any of the following:

- 1. Driving under the influence of alcohol or a controlled substance
- 2. Leaving the scene of an accident
- 3. Committing a felony with a motor vehicle
- 4. Reckless driving

Not more than two violations in the past 3 years of the following:

- 1. Excessive speed: 15 mph or more above the limit
- 2. Improper lane change
- 3. Following too closely
- 4. Preventable accidents

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ΑF	PLICANT'S	NAME:	AST)	(FIRST)		(MII)	DDI E INITIAI	\	(maiden, if any)		
TE	LEPHONE:	(L	A01)	MESSAG	E PH	HONE:	DDEL INTTA	-)	(maiden, ii any)		
		ZIP:									
		T THIS ADDR									
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DATE OF BIRTH: SOCIAL SECURITY #:											
PAST ADDRESSES (previous three years)											
		CTDEET	CITY		CTATE 9 ZID CODE						
1		STREET		CITY	•	STATE & ZIP CODE			HOW LONG?		
2											
3 4											
4			(ATTAC	 H SHEET IF MORE S	PACE	IS NEEDED))				
		EX	PERIENCE	AND QUALIF	ICA	TIONS -	- DRIVEF	₹			
DRIVER STATE				LICENSE NUMBER		TYPE			EXPIRATION		
	LICENSE										
				RIVING EXPE							
CLASS OF EQUIPMENT			TYPE OF EQUIPMENT (VAN, TANK, FLAT, ETC.)			ATES FROM:	DATES TO:		APPROX# OF MILES		
STRAIGHT TRUCK				,							
TRACTOR / SEMI-TRLR											
TRACTOR / 2 TRAILERS OTHER:											
<u> </u>									I		
	ACCIDI	ENT RECORD		FOR PAST 3 YEARS OR M			TACH S	HEET I	IEET IF NEEDED)		
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TRAFFIC CONVICTIONS AND FOREFEITURES FOR THE PAST 3 YEARS (OTHER THAN PARKING VIOLATIONS)

LOCATION	DATE	CHARGE	PENALTY				
^) VEC	NO			
·	a license, permit or privilege to opera						
B. Has any license, permit or privilege ever been suspended or revoked? YES IF THE ANSWER TO EITHER A OR B IS YES, ATTACH A STATEMENT GIVING FULL DI							
II THE ANSWER TO E	·		ING I OLL	DETAIL.			
NOTE: DOT requires records to	EMPLOYMENT RECO or 3 years and/or Commercial Driv	_	r past 10 v	ears be shown.			
•	•						
	POSITION HELD						
SALARY	_ REASON FOR LEAVING						
Subject to Federal Motor Carrier Sa Performed safety sensitive function	afety Regulations subject to DOT Controlled Substand	ce/Alcohol Testing	YES YES	NO NO			
SECOND LAST EMPLOYER	NAME						
ADDRESS							
PHONE	POSITION HELD	FRO	M/TO				
SALARY	_ REASON FOR LEAVING						
Subject to Federal Motor Carrier Sa Performed safety sensitive function	afety Regulations subject to DOT Controlled Substand	ce/Alcohol Testing	YES	NO NO			
THIRD LAST EMPLOYER N	AME						
ADDRESS							
PHONE	POSITION HELD	FRO	FROM/TO				
SALARY	REASON FOR LEAVING						
Subject to Federal Motor Carrier Sa Performed safety sensitive function	afety Regulations subject to DOT Controlled Substand	ce/Alcohol Testing	YES	NO NO			
	O BE READ AND SIGNED BY as completed by me, and that of my knowledge.		and inforr	nation in it to b			
(Date)		pplicants Signature	7)				

NOTE: A motor carrier may require an applicant to provide information in addition to the information required by the Federal Motor Carrier Safety Regulations.