



Motor Carrier Attachment

Accident Drivers Application for Employment

Crozet, Virginia January 31, 2018

HWY18MH005

(7 pages)

TIME DISPOSAL

434-977-3339

APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, disability or any other legally protected status.

(PLEASE PRINT CLEARLY)

Naylor Darna William
LAST NAME FIRST NAME MIDDLE NAME

[REDACTED]
ADDRESS CITY STATE ZIP

[REDACTED] [REDACTED] [REDACTED]
DAYTIME PHONE SOCIAL SECURITY # DATE OF BIRTH

10/01/2010 Driver / Back of truck
DATE OF APPLICATION POSITION YOU ARE APPLYING FOR

PLEASE ANSWER THE FOLLOWING QUESTIONS:
(Please circle Yes or No)

- If you are under 18 years of age, can you provide proof of your eligibility to work? Yes or No
- Are you a citizen of the United States? Yes or No
- If not, can you provide proof of lawful work status? Yes or No
- Type of Employment? Full Time Part Time Temporary
- Date you can start? 10/4/2010
- Are you currently Employed? Yes or No
- If so, May we contact your current employer? Yes or No
- Do you have a valid driver's license? Yes or No
- Have you ever filled an application with us before? Yes or No
- If yes, when? _____
- Have you ever been convicted of a crime other than a minor traffic violation? Yes or No
- If so, give date, court and place where offense(s) occurred _____
- Have you ever been discharged or requested to resign from a position? Yes or No
- If so, explain _____
- Does your present employer know of your plans to change employment? Yes or No
- Why do you desire to make a change? _____
- Would you have steady transportation to work? Yes or No

(No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature, date, surrounding circumstances and relevance of the offense to the position(s) applied for may, however, be considered.)

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

EDUCATION

High School

Did you graduate? Yes or No

Name and Address of School Charlottesville High School
Charlottesville, Va.

College/Trade

Did you graduate? Yes or No

Name and Address of School _____

Please give any information on special training you have received _____

List any equipment (trucks, forklifts, etc.) or woodworking related machinery that you have operated Drive Box trucks for previous employer

for 2 years. Also operated tractor, skid steer, and know how to run a forklift.

MILITARY

Have you served in the U.S. Armed Forces? Yes or No

If yes, when? _____

Did you receive any special training in the Armed Forces which will help you perform the job for which you are applying? Yes or No

If yes, please describe _____

How did you hear about the position? Newspaper Walk-in Friend

REFERENCES

(Do not list relatives or former employers)

[Redacted Name]	[Redacted Address]	[Redacted Phone]	23
Name	Address	Phone	Years Known
[Redacted Name]	[Redacted Address]	[Redacted Phone]	9
Name	Address	Phone	Years Known
[Redacted Name]	[Redacted Address]	[Redacted Phone]	5
Name	Address	Phone	Years Known

PRIOR WORK RECORD

(Start with most recent or present employer)

Employer D+D Lawn Care Started 9/06 Ended 02/07
Address Zuckersville, Pa Hourly Rate/Salary 12.50
Telephone Number [REDACTED] Your Position Crew leader
Supervisor [REDACTED] Work Performed Ran a landscaping crew
cutting grass, mulching, and trimming
Reason for Leaving Laid off.

Employer Express Car Wash Started 05/04 Ended 10/04
Address Charlottesville, Va. Hourly Rate/Salary 8.50
Telephone Number [REDACTED] Your Position _____
Supervisor [REDACTED] Work Performed Wiped down cars
as they came out the wash.
Reason for Leaving Better job opportunity

Employer _____ Started _____ Ended _____
Address _____ Hourly Rate/Salary _____
Telephone Number _____ Your Position _____
Supervisor _____ Work Performed _____
Reason for Leaving _____

Employer _____ Started _____ Ended _____
Address _____ Hourly Rate/Salary _____
Telephone Number _____ Your Position _____
Supervisor _____ Work Performed _____
Reason for Leaving _____

Employer _____ Started _____ Ended _____
Address _____ Hourly Rate/Salary _____
Telephone Number _____ Your Position _____
Supervisor _____ Work Performed _____
Reason for Leaving _____

Employer _____ Started _____ Ended _____
Address _____ Hourly Rate/Salary _____
Telephone Number _____ Your Position _____
Supervisor _____ Work Performed _____
Reason for Leaving _____


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JOB APPLICANT'S AGREEMENT AND CERTIFICATION

"I certify that the information given by me in this application is true in all respects, and I agree that if employed and the information provided is found to be false in any way, I may be subject to dismissal without notice, if and when discovered. I authorize the use of any information in this application to verify my statements, and I authorize the use of any information in this application to verify my statements, and I authorize the past employers, doctors, all references, and any other persons to answer all questions asked concerning my ability, character, reputation, and previous employment record. I release all such persons from any liability or damages on account of having furnished such information. I further agree, if employed, that I am to work faithfully and diligently, to be careful and avoid accidents, to come to work promptly, and I am not to be absent for any reason without prior notice to my supervisor.

I understand that nothing in this application or anything conveyed during my interviews are intended to create a contract for employment with TIME DISPOSAL. I understand that this organization is an at will employer. My employment and compensation can be terminated with or without cause, and with or without notice, at any time, at the option of either the Company or myself. It is further understood that this "at will" employment status may not be changed by any written or oral agreement or by contact unless such change is specifically acknowledged by Boyd McCauley, owner.

I agree to submit to test for use of illegal drugs whenever requested after I have been employed. If employed, I agree to abide by all present and subsequently issued personnel policies and rules. I further agree to use and properly maintain any company property issued to me for use in the performance of my job. If for any reason my employment should terminate I will return in good condition (excluding normal wear) any and all company property entrusted to me. If said property cannot be returned in good condition I agree to pay for it's replacement."



Signature of Applicant

10/01/2010

Date

TIME DISPOSAL will consider applications open for a period of sixty (60) days after the date of application. After 60 days, all applicants must complete a new application in order to be considered for employment with TIME DISPOSAL.

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NOTICE TO ALL APPLICANTS


The problem of drug and alcohol abuse has received national attention because of its magnitude and its potential for harm to individuals and society. TIME DISPOSAL is deeply concerned about the use of drugs and alcohol in the work place. We strongly believe that our working environment must be drug and alcohol free for reasons of safety, health; quality, service and productivity. A working environment not influenced by drugs and alcohol is in the best interest of all employees. We all must work together to keep our company free of drug and alcohol problems.

Before a job offer is made, an applicant for employment will be tested for alcohol, controlled substances and illegal drugs. The drug screening results will be returned to the company. This information will be used in the decision making process for your employment. An applicant who refuses to be tested or tests positive for alcohol, controlled substances or illegal drugs shall not be extended an offer of employment. In the cases of controlled substances, an applicant may be hired, in the discretion of the Company, if he or she can prove, through clear and convincing evidence, that his or her use of a controlled substance was prescribed by a licensed medical practitioner and consistent with legal drug use. Applicants denied employment for at least six months. Employees returning from a layoff may be tested at the discretion of the Company.

In some circumstances, an applicant will be offered employment and begin working before TIME DISPOSAL receives the drug screening results. If the results are positive, the new employee will be terminated immediately and may not reapply for employment for at least six months. As stated in the previous paragraph, however, if the drug screening results in a positive test for controlled substances, the new employee will not be terminated, in the discretion of the Company, if he or she can prove, through clear and convincing evidence, that his or her use of a controlled substance was prescribed by a licensed medical practitioner and consistent with legal drug use.

By signing this statement, the applicant understands that he/she consents to the drug screen being done and the applicant further understands that he/she releases TIME DISPOSAL, the examining physician, and the laboratory conducting the testing from any and all claims resulting from or arising out of the drug screen urinalysis as well as from any claims arising out of the use of the results of the drug screen urinalysis.


APPLICANT FURTHER AGREES THAT IF HE/SHE BEGINS WORKING AND THEN IS TERMINATED DUE TO A POSITIVE DRUG SCREEN RESULT, THE COST OF THE DRUG TEST PLUS A 20% PROCESSING FEE WILL BE DEDUCTED FROM ANY WAGES DUE TO THE APPLICANT UPON TERMINATION.



Applicant Signature

10/01/2010

Date



Applicant Signature (Print)

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DRIVER WORK HISTORY FORM

In compliance with Federal Motor Carrier Safety Administration (FMCSA) 49 CFR 380, 390 and 391 Safety Performance History of New Drivers dated March 30, 2004, TIME DISPOAL LLC, require that applicants for driver positions disclose all positions held by the applicant in the last 3 years that were regulated by the FMSCA so that the applicants driver safety history may be released by past employers in consideration of a new driver position at TIME DISPOSAL TRASH & RECYCLING SERVICE, LLC. Note that as an applicant, you have the right to inspect and safety history information provided by your past employers and given to TIME DISPOSAL in consideration for your employment as a driver. If hired, this safety history information will be kept in your Driver Qualification File (DQF) and held confidentially until officially requested by a future employer.

PLEASE COMPLETE INFORMATION BELOW, INCLUDE ALL DOT-REGULATED POSITIONS HELD IN THE PAST THREE (3) YEARS.

Employer _____ Started _____ Ended _____
Address _____ Position regulated by FMSCA _____
Telephone Number _____ Your Position _____
Supervisor _____ Reportable Accidents _____
Comments _____

Employer _____ Started _____ Ended _____
Address _____ Position regulated by FMSCA _____
Telephone Number _____ Your Position _____
Supervisor _____ Reportable Accidents _____
Comments _____

Employer _____ Started _____ Ended _____
Address _____ Position regulated by FMSCA _____
Telephone Number _____ Your Position _____
Supervisor _____ Reportable Accidents _____
Comments _____

Employer _____ Started _____ Ended _____
Address _____ Position regulated by FMSCA _____
Telephone Number _____ Your Position _____
Supervisor _____ Reportable Accidents _____
Comments _____

I attest that all of the information I have provided above is true.

I hereby authorize my past employer(s) to release to TIME DISPOAL TRASH & RECYCLING SERVICE, LLC information required by section 40.25 and 391.23 of the FMSCR.

Applicant Signature

Date