Driver Application for Employment

Commercial Motor Vehicle (CDL) Driver. Please print clearly or type in the fields. Complete all sections.

EMPLOYER (MOTOR CARRIER)

Motor carrier name: Nortex Energy LLC

Motor carrier address: 6164 25th Street NW, Ryder, ND 58779

APPLICANT INFORMATION

Last name | First name | Middle | Date of application

Date of birth | Social Security number | Phone | Email

Current street address | City | State | ZIP

How long at this address | Position applied for: CDL Driver | Date available to start

Are you legally eligible to work in the United States? ☐ Yes ☐ No

Are you at least 21 years old? ☐ Yes ☐ No

PREVIOUS ADDRESSES (PAST 3 YEARS)

Street address	City	State	ZIP	From (mo/yr)	To (mo/yr)

DRIVER LICENSES HELD (PAST 3 YEARS)

Issuing state / authority	License number	Class	Endorsements	Expiration date

DRIVING EXPERIENCE

List the type and extent of your commercial driving experience. Leave blank any equipment you have not operated.

Equipment	Type of equipment / details	Dates from	Dates to	Approx. total miles
Straight truck				
Tractor and semi-trailer				
Tractor and two trailers				
Tanker (liquid / crude / water)				
Vacuum truck				
Winch / heavy haul				
Flatbed / hot shot				

ACCIDENT RECORD (PAST 3 YEARS)

If no accidents in the past 3 years, check: ☐ None

Date	Nature of accident (head-on, rear-end, rollover, etc.)	Fatalities	Injuries

TRAFFIC CONVICTIONS AND FORFEITURES (PAST 3 YEARS, OTHER THAN PARKING)

If no convictions in the past 3 years, check: ☐ None

Date	Location	Charge	Penalty

LICENSE DENIAL, SUSPENSION OR REVOCATION

A. Have you ever been denied a license, permit or privilege to operate a motor vehicle? ☐ Yes ☐ No

B. Has any license, permit or privilege ever been suspended or revoked? ☐ Yes ☐ No

If yes to A or B, give details (date, state, reason, reinstatement)

EMPLOYMENT HISTORY

List all employers during the past 3 years, most recent first, including periods of unemployment. If you are applying to drive a commercial motor vehicle (CDL), also list every employer for whom you operated a CMV during the 7 years before that (10 years total). Attach additional sheets if needed.

Employer 1 (current or most recent)

Employer name | Address, city, state | Phone

Position held | From (mo/yr) | To (mo/yr) | Reason for leaving

Subject to the FMCSRs while employed? ☐ Yes ☐ No Safety-sensitive / DOT drug & alcohol testing? ☐ Yes ☐ No

Employer 2

Employer name | Address, city, state | Phone

Position held | From (mo/yr) | To (mo/yr) | Reason for leaving

Subject to the FMCSRs while employed? ☐ Yes ☐ No Safety-sensitive / DOT drug & alcohol testing? ☐ Yes ☐ No

Employer 3

Employer name | Address, city, state | Phone

Position held | From (mo/yr) | To (mo/yr) | Reason for leaving

Subject to the FMCSRs while employed? ☐ Yes ☐ No Safety-sensitive / DOT drug & alcohol testing? ☐ Yes ☐ No

Employer 4

Employer name | Address, city, state | Phone

Position held | From (mo/yr) | To (mo/yr) | Reason for leaving

Subject to the FMCSRs while employed? ☐ Yes ☐ No Safety-sensitive / DOT drug & alcohol testing? ☐ Yes ☐ No

Employer 5

Employer name | Address, city, state | Phone

Position held | From (mo/yr) | To (mo/yr) | Reason for leaving

Subject to the FMCSRs while employed? ☐ Yes ☐ No Safety-sensitive / DOT drug & alcohol testing? ☐ Yes ☐ No

NOTICE AND AUTHORIZATION

Nortex Energy LLC will investigate your safety performance history with Department of Transportation regulated employers during the preceding 3 years, as required by 49 CFR 391.23, including accident information and drug and alcohol testing history. You have the right to review information provided by previous employers, to have errors corrected by the previous employer, and to have a rebuttal statement attached to the alleged erroneous information. Requests to review must be made in writing within 30 days of being hired or notified of denial of employment.

Nortex Energy LLC will also request your motor vehicle record from each state where you held a license during the past 3 years, query the FMCSA Drug and Alcohol Clearinghouse with your separate electronic consent, and require a DOT pre-employment drug test and a current DOT medical examiner's certificate before you perform any safety-sensitive function.

I authorize Nortex Energy LLC to make such investigations and inquiries of my personal, employment, driving and other related matters as may be necessary in arriving at an employment decision, and I release employers and persons from all liability in responding to such inquiries.

APPLICANT CERTIFICATION

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 signature

Date

Printed name

FOR OFFICE USE ONLY

Received by

Date received

MVR ordered

Clearinghouse queried

Prior employer inquiries sent

Drug test date / result

Medical card expiration

Decision / notes