APPLICATION ADDENDUM FOR EMPLOYMENT REQUIRING DRIVING

COMPANY: Downeast Tra	insportation Inc.				
ADDRESS: PO Box 914, E	llsworth, Maine 04605	5			
NAME		Phone:	()		
DRIVER LICENSES: (list all license nu				EXPIRATION	
Have you ever been denied, Yes No	or had revoked or susp				otor vehicle?
If you answered YES to the	above questions, give	details: (if ad	ditional space is no	eeded, attach sheet)	
TRAFFIC CONVICTIONS & F	ORFEITURES FOR THE	E PAST 3 YEAI	RS: (other than parking	g)	
CITY & STATE	DATE		CHARGE	PENALTY	
DRIVING EXPERIENCE:					
CLASS OF EQUIPMENT	DATES: FROM	TO	APPROXIM	MATE # OF MILES	
Automobile					
Van/Pickup					
Truck/Tractor					
Bus					
Oth an (am a sifty)					

<u>DATE</u>	LOCATION	NATURE OF ACCIDENT	FATALITIES(Y/N)	INJURIES(Y/N)
GENE	RAL:			
Have y	ou ever been convict	ed of a felony? Yes No	_	
Have y	ou ever been refused	bond ? Yes No		
If you	answered YES to eith	ner question, give details: (if additional	I space is needed, attach shee	et)
<u>TO 1</u>	BE READ BY	APPLICANT:		
infor hired dism ascer not, a resul demo	mation in it are any misrepressissal. I authorize tain all information from furnishments and release those ting from furnishments are my abilities and the job, the	is application was complete true and complete to the be- entation of the information ze Downeast Transportation ation of concern to my emple se providing such information shing this information. Furt lity to perform the essential at it may be conditioned on es and alcohol misuse test.	est of my knowledge in this application is a Inc. to investigate a loyment history, who on from all liability ther, I understand that functions necessary	e. I understand that, if so cause for immediate my background to either same is of record of for any damages at I may be asked to to complete the job and
APP	LICANT'S SIGNA	ATURE:	DATE:	