Application for Employment (An Equal Opportunity Employer) Email: hr@countyconcretenj.com

			Date:	
PERSONAL INFORMAT	ION (Please Print All	Information on T	his Application)	
Name				
LAST Current		FIRST		MIDDLE
Address				
Street/Apartn Zip Code	nent Number	C	City/Town S	State
Social Security Number	Telephon Number (e)	Other Number ()
	-	/		/
PREVIOUS ADDRESS	(If at present address fo	r less than three y	ears)	
Street/Apartment		City		State
Zip Code				
State	reet/Apartment Zip Code		City	
	-			
EMPLOYMENT DESIRE	D			
Position		Date You		Expected
POSITION		Call Start _	V	wages
Per Hour				
Per Hour	Have You		Date of Employment	
Per Hour	Have You			
Per Hour Referred By	Have You This Com Previous	pany Before?	From Rate of	To Reason for
Per Hour	Have You This Com Previous	pany Before?	From	To Reason for
Per Hour Referred By Where	Have You This Com Previous Position	pany Before?	From Rate of	To Reason for
Per Hour Referred By Where	Have You This Com Previous Position	pany Before?	From Rate of	To Reason for
Per Hour Referred By Where Where Name(s) of any relative employ	Have You This Com Previous Position red by this Company	pany Before?	From Rate of	To Reason for
Per Hour Referred By Where Name(s) of any relative employ EDUCATION / SPECIAL	Have You This Com Previous Position ed by this Company STUDY / RESEARCH	pany Before?	Rate of Pay	To Reason for
Per Hour Referred By Where Where Name(s) of any relative employ	Have You This Com Previous Position ed by this Company STUDY / RESEARCH	pany Before?	From Rate of	To Reason for
Per Hour Referred By Where Name(s) of any relative employ EDUCATION / SPECIAL Circle highest grade completed:	Have You This Com Previous Position ed by this Company STUDY / RESEARCH	pany Before?	Rate of Pay	To Reason for
Per Hour Referred By Where Wame(s) of any relative employ EDUCATION / SPECIAL Circle highest grade completed: Last School attended	Have You This Com Previous Position ed by this Company STUDY / RESEARCH	pany Before? WORK 11 12 College: 1	Rate of Pay	To Reason for
Per Hour Referred By Where Name(s) of any relative employ EDUCATION / SPECIAL Circle highest grade completed: Last School attended	Have You This Com Previous Position ed by this Company STUDY / RESEARCH	pany Before? WORK 11 12 College: 1	From Rate of Pay 2 3 4 Degree :	To Reason for

EMPLOYMENT RECORD

Current Employer	Supervisor's Full Name
Address	Zip Code Phone ()
Position Held	From To Wages
	(month/year) (month/year)
Reason for leaving	
Company / Employer	Supervisor's Full Name
Address	Zip Code Phone ()
Position Held	From To Wages
Reason for leaving	(month/year) (month/year)
Company / Employer	Supervisor's Full Name
	Zip Code Phone ()
Position Held	From To Wages
Reason for leaving	(month/year) (month/year)

past three (3) years. The U.S. Department of Transportation requires that Driver Applicants state their Date of Birth under 49 CFR 391.21(b)(2) and the current License Number, State of Issue and Expiration Date as required under 49 CFR 391.21(b)(5). If more space is necessary, attach a separate sheet listing the appropriate information.

Date of	Current License	State of	Class and
Expiration			
Birth	Number	Issue	Endorsement
Date			

LICENSES: For the past three (3) years, not including the current license

State	License #		Class	Endorsements	Expiration	Date
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State	License #			Class	Endorsem	ents	_Expiration Date
State	License #			Class	Endorsem	ents	_Expiration Date
A. Have y	ou ever been den	ied a license, perr	nit or privilege to	operate a motor	vehicle? Yes	N	0
B. Has any	y license, permit	or privilege ever t	been suspended or	revoked?	Yes	N	0
C. Have y	ou ever been disc	qualified for viola	tions of the Federa	l Motor Carrier	Safety Regulati	ons? Yes	No
(If you ans	wered "YES" to	A or B or C or an	y and all, attach a	statement giving	g details.)		
DRIVING	EXPERIENCE	2:					
Straight Tr	uck: Van Ta	ank Flat	_ Other	Date: 1	From	То	_ Total Miles
Tractor &	Semi-Trailer: Bo	x Tank	_ Dump Fla	at Date: 1	From	То	_ Total Miles
Twin Trail	ers:	_ Other type vehic	cles:	States opera	ated in last five	years:	
-		ing that will help	you as a				
List driving	g & any safety av	wards presented to	you				
ACCIDEN	NT REVIEW: F	or the past three	(3) years				
DATE (s) Most Rece		of Accident on, <u>Rear-end, etc.)</u>			Vehicle Operated	Fatalities Involved	Injuries <u>Involved</u>
			TIONS & FORF				
<u>City/Town</u>		Date Date	Charge/Viola			Penalty	

VEHICLE / EQUIPMENT MAINTENANCE EXPERIENCE & QUALIFICATIONS (Check appropriate areas – insert dates)

List courses and training in this and the next section: _

Experience							
Years of		Years of	Experience	Formal	Years of	Experience	Formal
<u>Training</u> Experience		Experience	Training	<u>Training</u>	Experience	Training	<u>Training</u>
Drive Line			Body Work			Brakes	
Diesel Engine Tune-up/Rebuildir	ıg		Electrical System Repair			Cooling System	
Gas Engine Tune-up/Rebuildir	ng		Frame/Wheel Alignment			Inspections Car/Truck	
Tire Service			Air Conditioning			General Car Re	pair
Trailer Repair			Heavy Equipment		Li	st	
SHOP EQUIPM	IENT (Cl	heck approp	riate areas & insert dates)			
Experience	Formal	Years of	Experience	Formal	Years of	Experience For	nal Years of
Sheet Metal			Dynamometers			Welders	
Paint Spray Gun			Analyzer			P.C. Service To	ols
Paint Spray Gun Straightening			Analyzer Equipment			P.C. Service To Equipment	ols
Straightening List any other cour	rses and tra		-	two sectio	 DNS	Equipment	
Straightening List any other cour above	rses and tra	uining not pre	Equipment eviously list in the previous	two sectio	 DNS	Equipment	
Straightening List any other cour above HEAVY EQUII Loader	PMENT I	Lining not pre	Equipment eviously list in the previous NCE (Insert number of ye Track hoe Backl	two section	ns rience)	Equipment	
Straightening List any other cour above HEAVY EQUI Loader Haul Truck Sand Plant Mill W	rses and tra PMENT 1 _ Dozer Grader 'ork	EXPERIEN	Equipment eviously list in the previous NCE (Insert number of ye	two section	rience)	Equipment	
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Straightening List any other cour above HEAVY EQUI Loader Haul Truck Sand Plant Mill W Other Qualification	rses and tra PMENT 1 Dozer Grader fork	 EXPERIEN R	Equipment eviously list in the previous NCE (Insert number of ye Track hoe Backl Roller Othe	two section ears' expe noe erOpe	ons rience) Forklift en Pit Mining	EquipmentCraneDredge	
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List Courses and Training received in Office Work _

APPLICANTS MUST READ AND SIGN

I certify that I have read and understood all of this employment application. It is agreed and understood that the employer or his/her agent(s) may investigate my background to ascertain any and all information of concern to my employment history, whether same is of record or not, and I release employers and other persons so representing the company from all liability for any damage(s) and claim(s) on account of furnishing such information. I understand that as an applicant for a position with this company, I may be asked to demonstrate that I am capable of performing tasks which are pertinent to the job. I also understand that if offered a job, it may be conditioned on the results of a physical examination and drug test.

I further certify that I am a genuine applicant for employment and this application is being submitted solely for the purpose of seeking employment with the employer and for no other reason.

It is also agreed and understood that under the Fair Credit Reporting Act, Public Law 91-508, I have been told that this investigation may include an investigative Consumer Report, including information regarding my character, general reputation, personal characteristics, and mode of living.

I agree to furnish such additional information and complete such examinations as may be required to complete my employment file.

I also understand that misrepresentation or omission of information or facts on this application or any other document required for employment, including a medical examination report may result in my rejection or dismissal.

If hired, I agree to abide by all the rules and policies of the employer, including the participation in a random drug and alcohol testing program and a review(s) of my Motor Vehicle Driving Record. It is further understood and agreed that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at either my or the company's option. I also understand and agree that the terms and condition of my employment may be changed, with or without cause and with or without notice, at any time by the company.

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.

 Date
 Applicant Signature

 Date
 Signature of Interviewing Officer

County Concrete Corporation, with its main office located at 50 Railroad Avenue (PO Box F), Kenvil, Roxbury Township, Morris County, New Jersey 07847, telephone number (973) 584-7122, is a equal opportunity employer and complies with State and Federal Laws and Regulations pertaining to fair employment practice prohibiting employment discrimination. In addition, County Concrete Corporation complies with the provisions of the Americans with Disabilities Act and the final Regulations and interpretive guidance promulgated by the EEOC on July 26, 1991