

DATE: _____

APPLICATION TO SUB-CONTRACT AS AN OWNER/OPERATOR

NAME: _____ HOME PH: _____ CELL: _____

ADDRESS: _____ CITY: _____ POSTAL CODE: _____

DATE OF BIRTH: _____ SOCIAL INSURANCE NO. _____

MALE _____ FEMALE _____ BC DRIVER LICENSE NO. _____

NO. OF POINTS _____ ANY RESTRICTIONS (PLEASE LIST) _____

HOW LONG HAVE YOU HELD A VALID DRIVER LICENSE? _____

HAVE YOU EVER BEEN INVOLVED IN A CAR ACCIDENT? IF YES PLEASE PROVIDE DETAILS:

WHAT PARTS OF THE LOWER MAINLAND ARE YOU MOST FAMILIAR: _____

DO YOU KNOW HOW TO READ A MAP? _____ DO YOU HAVE A GPS? _____

WHAT 2 BRIDGES CONNECT INTO SURREY? _____

WHAT 2 BRIDGES CONNECT TO NORTH SHORE? _____

LAST GRADE COMPLETED _____ ARE YOU BONDABLE? _____

MONTHLY COMMISSION EXPECTED _____

MY VEHICLE IS A _____
CAR/ TRUCK/VAN YEAR MAKE MODEL

COLOUR _____ LICENSE PLATE NO. _____

I OWN _____ LEASE _____ MY VEHICLE I AM LISTED AS THE PRICINPAL OPERATOR _____
YES NO

PLEASE SEE REVERSE OF THIS PAGE TO COMPLETE APPLICATION.

EMPLOYMENT HISTORY

COMPANY	POSITION	FROM	TO	PHONE	REASON FOR LEAVING
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

REFERENCES:

NAME	OCCUPATION	ADDRESS	PHONE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

HAVE YOU PREVIOUSLY RECEIVED BENEFITS FROM WCB? _____ IF YES PLEASE PROVIDE DETAILS

CONTACT PERSON IN CASE OF EMERGENCY _____

RELATIONSHIP TO ME: _____ PHONE: _____

ADDRESS: _____

I CERTIFY THE INFORMATION CONTAINED IN THIS APPLICATION IS CORRECT TO THE BEST OF MY KNOWLEDGE AND I UNDERSTAND THAT DELIBERATE FALSIFICATION OF THIS INFORMATION IS GROUNDS FOR TERMINATION OF ANY CONTRACT BETWEEN PROGRESSIVE MESSENGER LTD AND ME. I AUTHORIZE THE REFERENCES LISTED ABOVE TO GIVE ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THAT THEY MAY HAVE, PERSONAL OR OTHERWISE AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING INFORMATION TO YOU.

DATE: _____ SIGNATURE: _____