

Vehicle Use Agreement

Employee Name: _____ Driver's License Number: _____

State Issuing License: _____ Date of Birth: _____ Office Location: _____

The above named employee, herein after referred to as the employee, is authorized to operate a motor vehicle on company business only under the following conditions:

1. The employee follows and cooperates fully with the Motor Vehicle Safety Policy including MVR criteria.
2. The employee maintains a valid driver's license and remains fully insurable.
3. The employee operates the vehicle in a safe, defensive manner, obeying all traffic laws.
4. The employee and their passengers wear their seat belts.
5. The employee promptly reports all motor vehicle accidents to the Safety Department or Shop Manager or Human Resources.
6. The employee assumes full responsibility for any traffic violations and fines arising out of the use of the vehicle.
7. Personal use of company provided vehicles is prohibited without prior verbal approval from Management.
8. ESCO Group may modify or revoke this agreement at any time, with or without notice.

I have read, understand, and agree to comply with the above conditions, in exchange for being authorized to drive on company business.

Employee Printed Name: _____ Date: _____

Employee Signature: _____ Date: _____

Witness: _____ Date: _____

Proprietary Information

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A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.ftc.gov/credit or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.**

You must be told if information in your file has been used against you. Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.

You have the right to know what is in your file. You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to free file disclosure if:

- a person has taken adverse action against you because of information in your credit-report;
- you are the victim of identity theft and place a fraud alert in your file;
- your file contains inaccurate information as a result of fraud;
- you are on public assistance;
- you are unemployed but expect to apply for employment within 60 days.

In addition, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.ftc.gov/credit for more information.

You have the right to ask for a credit score. Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.

You can dispute incomplete or inaccurate information. If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.ftc.gov/credit for an explanation of dispute procedures.

Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information. Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

Consumer reporting agencies may not report outdated negative information. In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

Access to your file is limited. A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.

You must give your consent for reports to be provided to employers. A consumer reporting agency may not give

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out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.ftc.gov/credit.

You may limit “prescreened” offers of credit and insurance you get based on information in your credit report. Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).

You may seek damages from violators. If a consumer reporting agency, or, in some cases, a user or consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.

Identity theft victims and active duty military personnel have additional rights. For more information, visit www.ftc.gov/credit.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:

TYPE OF BUSINESS:	CONTACT:
Consumer reporting agencies, creditors and others not listed below	Federal Trade Commission: Consumer Response Center - FCRA Washington, DC 20580 1-877-382-4357
National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Consumer Help (FRCH) P O Box 1200 Minneapolis, MN 55480 Telephone: 888-851-1920 Website Address: www.federalreserveconsumerhelp.gov Email Address: ConsumerHelp@FederalReserve.gov
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name)	Office of Thrift Supervision Consumer Complaints Washington, DC 20552 800-842-6929
Federal credit unions (words "Federal Credit Union" appear in institution's name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 703-519-4600
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Consumer Response Center, 2345 Grand Avenue, Suite 100 Kansas City, Missouri 64108-2638 1-877-275-3342
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation, Office of Financial Management Washington, DC 20590 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture

(This summary was prepared by the Federal Trade Commission.)

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Disclosure

In connection with your application for employment, we may procure a consumer report, which may contain public record information such as your driving record on you as part of the process of considering your candidacy as an employee and/or in your continued employment with our organization. In the event that information from the report is utilized in whole or in part in making an adverse decision with regard to your potential or continued employment, before making the adverse decision, we will provide you with a copy of the consumer report and a description in writing of your rights under the federal Fair Credit Reporting Act.

The Fair Credit Reporting Act gives you specific rights in dealing with consumer reporting agencies. You will be given a summary of these rights together with this document.

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Authorization

By my signature below, I hereby authorize you or your representative to obtain a Motor Vehicle Records Report(s) in order to be considered for employment or continued employment with this company. If hired, this authorization shall remain on file and shall serve as ongoing authorization for this organization or its representatives to procure a Motor Vehicle Records Report at anytime during my employment.

Applicant's Name: _____
(Please print)

Applicant's Address: _____

City, State, Zip: _____

Signature: _____

Date: _____

Driver's License Number: _____ State Issuing License: _____

Please check here if you would like a copy of the Motor Vehicle Records Report.

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Decline

By my signature below, I **refuse** to authorize you or your representative to obtain a Motor Vehicle Records Report. I therefore will NOT drive any company vehicle or drive any other vehicle to conduct company business. If I violate this agreement it is grounds for disciplinary action, up to and including discharge. ESCO Group will not be held liable for any accidents that may involve a vehicle I am driving.

Applicant's Name: _____
(Please print)

Applicant's Address: _____

City, State, Zip: _____

Signature: _____

Date: _____

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MVR REVIEW

Driver Name: _____ Date Reviewed with Driver: _____
 Location: _____ Reviewer: _____

Violation	Number of	Points assigned	Total
DUI/DWI (Type A Violation)		x6	
Chemical test refusal (Type A Violation)		x6	
Reckless/careless driving (Type A Violation)		x6	
Driving with suspended license		x4	
Fleeing police		x4	
Leaving the scene of an accident		x3	
Speeding		x2	
Following too close		x2	
Traffic signal offenses		x2	
Improper/illegal lane change or turn		x2	
At Fault Accident		x2	
Operating a defective vehicles		x1	
Failure to yield		x1	
Failure to signal		x1	
Failure to use a seat belt		x1	
Use of cell phone/mobile device while operating Company or personal vehicle for business purposes		x1	
Failure to follow company policy (points assigned at company's discretion)			
Other (points assigned at company's discretion)			
Total MVR Points			

If the total points equal:

6 or more points

Unacceptable: Driving privileges will be revoked unless employee meets requirements for MVR probation (see page 61-15 for details).

4 to 5 points

Below Expectations: Improvements are necessary for moving violations. Employee shall attend driver safety training. MVR will be ran quarterly until employee reaches the "Acceptable" level.

0 to 3 points

Acceptable

NOTE: The MVR review criteria above, is intended to serve as a guideline for evaluation purposes. Allowance will be made for "Unacceptable" MVRs following guidelines on page 61-16, MVR Probation.

Signatures

I confirm that my driving record was reviewed with me on this date by management. I fully understand the company MVR program and MVR review process. I also understand the corrective actions, if any, that apply to my review.

Driver signature: _____ Date: _____

I confirm that I have conducted an MVR review on this date as documented by this report. I reviewed the corrective actions, if any apply.

Reviewer Signature: _____ Date: _____

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MVR PROBATION

The MVR Scorecard process is designed to enable ESCO Group to minimize fleet and safety liability and encourage safe and lawful driving. Employees that are required to drive for company purpose, be it in company or personally owned vehicles should maintain an “Acceptable” driving record. Employees that reach the “Unacceptable” driving level will be eligible for “MVR Probation”. Management will provide reasoning and employee expectation for their employee to be placed on MVR probation to the Human Resources and Safety Departments.

Probation Terms

- Employee must have a valid driver’s license
- Employee has 6 points or more on current MVR scorecard (page 61-15)
- Employee will remain on probation until their fleet scorecard reflects a score less than 6 points
- Employee shall successfully complete The ESCO Group driver safety training prior to being placed on probation driving period. Employee can forgo training if driver safety training has been taken within a year or the safety department deems it unnecessary due to infraction level
- Employees on probation will have quarterly MVR scorecards completed and reviewed with management
- Employee’s driving privileges will be revoked if additional points are accumulated while on probation (this will be a “Last Chance” notification)

Completion Date of ESCO Group Driver Safety Training: _____

Probation Period Expiration Date: _____

Scheduled Review Date: _____

Driver print: _____ Date: _____

I confirm that I have conducted an MVR review on this date as documented by this report. I reviewed the corrective actions that apply and agree to the Probation Terms.

Driver Signature: _____ Date: _____

Management Signature: _____ Date: _____

Safety Department Signature: _____ Date: _____

HR Department Signature: _____ Date: _____

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EXONERATION CARD

To Whom It May Concern:

I, _____ hereby exonerate and free from all negligence or blame _____ (driver) and his/her employer in connection with an accident involving myself which occurred at _____ a.m./p.m. on ____/____/____.

Location of Accident _____

Name _____
Signature _____ Date _____
Address _____
City _____ ST _____ Zip _____

Witnessed By _____
Signature _____ Date _____

EXONERATION CARD

To Whom It May Concern:

I, _____ hereby exonerate and free from all negligence or blame _____ (driver) and his/her employer in connection with an accident involving myself which occurred at _____ a.m./p.m. on ____/____/____.

Location of Accident _____

Name _____
Signature _____ Date _____
Address _____
City _____ ST _____ Zip _____

Witnessed By _____
Signature _____ Date _____

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Location of Accident _____

Name _____
Signature _____ Date _____
Address _____
City _____ ST _____ Zip _____

Witnessed By _____
Signature _____ Date _____

EXONERATION CARD

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Location of Accident _____

Name _____
Signature _____ Date _____
Address _____
City _____ ST _____ Zip _____

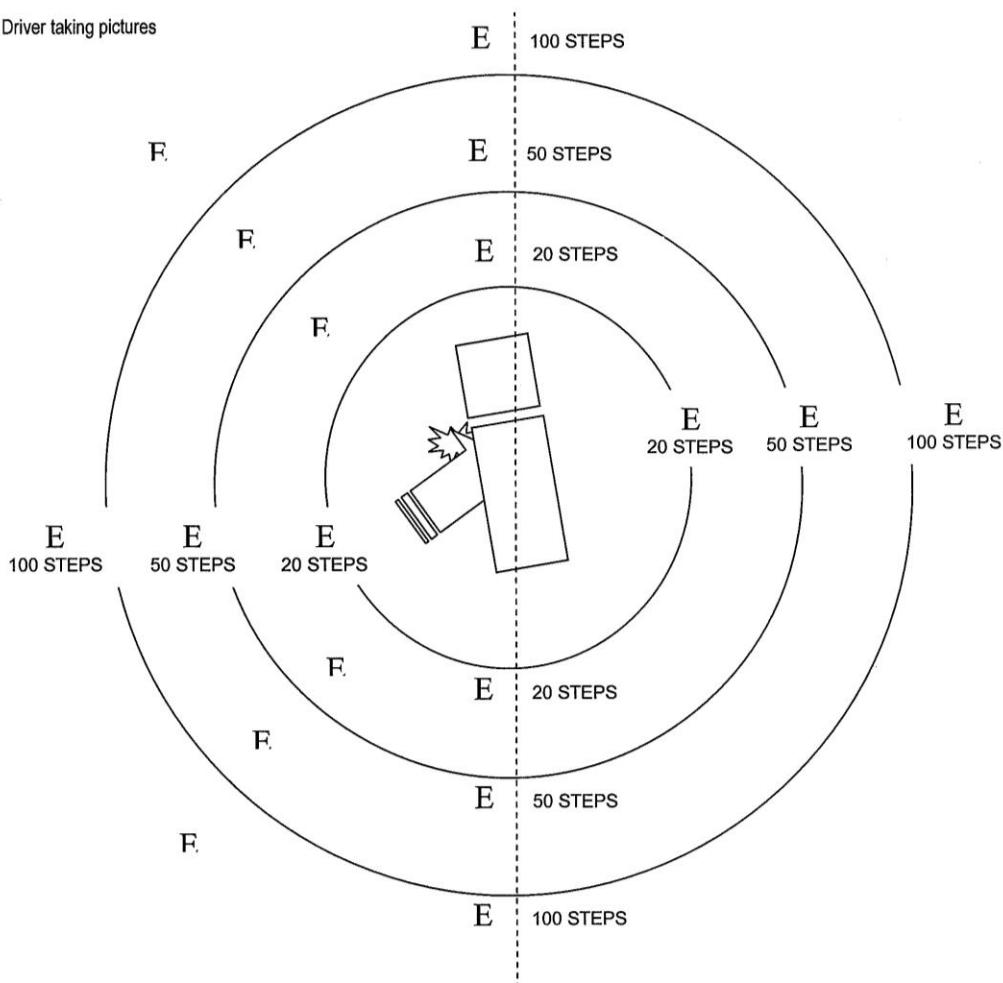
Witnessed By _____
Signature _____ Date _____

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PHOTOGRAPHING AN ACCIDENT SCENE

E Driver taking pictures



- | | |
|--|--|
| <ul style="list-style-type: none"> • Take pictures from all directions including 20 steps, 50 steps, and 100 steps out from accident. • Take pictures of road, debris left from accident, any skid marks, or gouges in pavement (use tape measure or other reference mark to show size). • Take pictures of vehicles at point of rest. • Note in accident description that you took pictures at the scene. • Take a picture of your truck number. | <ul style="list-style-type: none"> • Take pictures of damage to vehicles (interior and exterior). Again, use reference marker to note size. • Take pictures of any factors that contributed to the accident. • Take pictures of pre existing damage on other vehicles involved. • Take pictures of license plates of vehicles involved and of the witness' vehicles. • Use the entire roll of film at the accident scene. • DO NOT TAKE PICTURES OF INJURED PEOPLE. |
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