

# Tremmel-Anderson Trucking LLC

## Training Program

Tremmel-Anderson Trucking LLC has always taken the time to provide an opportunity to speak with potential & all employees who are looking to enter our dump truck family and/or current employees. We are looking for dependable & experienced employees who can honor the commitment that is required to uphold the high standard of service our customers/contractors have grown accustomed to. All drivers must be able to read and speak English well enough to read road signs, prepare reports, and communicate with law enforcement officers and the public. Please refer to list below for requested requirements to apply for employment with Tremmel-Anderson Trucking LLC.

### Training provide to employees:

1. Knowledge and understanding to perform DOT required pre-trip and post- trip inspections paper work.
2. Snowplowing (if needed).
3. Snow removal in quad axle dump (if needed).
4. Paving in quad axle dump truck (if needed).
5. Working under a milling machine (if needed).
6. Dumping into a shouldering machine (if needed).
7. Skid steer operations (if needed).
8. General mechanics for basic repairs during the work day.
9. Knowledge of how to grease quad axle dump trucks, at critical pivot points.
10. Proper work ticket completion.

Tremmel-Anderson Trucking LLC strongly urged to refer qualified women and minority candidates to apply for employment.

God Bless,

Theresa Tremmel-Anderson - Owner  
Tremmel-Anderson Trucking LLC  
Office: 1-262-538-4922

# Tremmel-Anderson Trucking LLC

## Equal Employment Opportunity Policy

The employment policies and practices of Tremmel-Anderson Trucking are designed to recruit and to hire employees; in order to provide equal employment and advancement opportunities to all individuals, employment decisions at Tremmel-Anderson Trucking LLC will NOT be based religious beliefs, age, disability, national origin, ancestry, marital status, race, color, creed, gender/sex, sexual orientation, use of lawful products, arrest or conviction record, honesty testing, pregnancy or child birth, genetic testing, military service membership, veteran status, in hiring, placement, promotions, upgrades, transfer or demotion, layoffs, terminations, rehires, rates, recruitment, advertising or solicitation for employment, treatment during employment, rate of pay or other forms of compensation, or selection for training including apprenticeship and on the job training.

Tremmel-Anderson Trucking LLC commits to this policy to assure compliance with the Civil Rights Act of 1964 and Federal Executive Order No. 11246 and/or other subsequent orders that may pertain to this program and other State statutes and Federal Laws and/or other subsequent orders that may pertain to this program, and to reaffirm our continued commitment to a program of equal employment opportunity and merit employment policies.

We will exercise leadership within the community and put forth a maximum effort to achieve full employment and utilization of the capabilities and productivity of all our citizens without regard to race, creed, color, sex, or national origin.

Employees are urged to refer qualified women and minority candidates to apply for employment.

Tremmel-Anderson Trucking further recognizes that the effective application of a policy of merit employment involves more than just a policy statement and will, therefore, undertake a program of affirmative action to make known that equal employment opportunities are available on the basis of individual merit and to encourage all persons to seek employment with the company and to strive for advancement of this basis.

We expect all subcontractors, lessees, vendors, suppliers and trucking firms, where applicable, to comply with our Equal Opportunity Program and further comply with all Federal and State guidelines regarding equal opportunity employment.

Tremmel-Anderson Trucking has appointed Theresa Tremmel-Anderson as the EEO Officer. Any suspected violations of this policy should be reported to her as soon as possible, or a complaint maybe filed directly with the appropriate agencies lists can be acquired from Theresa Tremmel-Anderson.

**Theresa Tremmel-Anderson**  
Tremmel-Anderson Trucking, LLC.

# Tremmel-Anderson Trucking LLC

## Personal Information

Name-

(First)

(Middle)

(Last)

Home Phone-

Cell Phone-

Birth Date-

Age-

### Emergency Contact

Name-

Phone Number-

### Current Residence

(Street)

(City)

(State)

(Zip Code)

(How Long?)

### Previous residence if Currant Address is less than one year-

(Street)

(City)

(State)

(Zip Code)

(How Long?)

## Experience and Qualifications- Driver

Drivers Licenses Type	State	License Number	Expiration Date	Hazmat Endorsement
				Yes / No
				Yes / No
				Yes / No

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

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

IF THE ANSWER TO EITHER QUESTION IS YES, ATTACH A STATEMENT GIVING DETAILS

**Driving Experience**

Class of Equipment	Type of equipment (Van, Tank, Flat, ECT)	Dates		Approx. No of Miles (Total)
		From	To	
Straight Truck				
Tractor and Semi Trailer				
Tractor –Two Trailers				
Other				

**Traffic Record for the Past 3 Years**

**Accident History**

Dates	Nature of Accident (Head-On, Rear-End, Upset, ECT)	Fatalities	Injuries

**Speeding/Points Violation**

Location	Date	Charge	Penalty

## **Employment Questions**

Have you ever applied at Tremmel-Anderson Trucking before? Yes      No

I am certifying that I am able to perform the essential functions of the job, for which I am applying with or without a reasonable accommodations, as described to me during the application process, through materials made available to me Yes      No

Are you legally eligible for employment in this country? Yes      No

Are you able to meet the attendance requirements of the position? Yes      No

Have you ever plead "guilty" or "no contest" to, or been convicted of a felony? Yes      No

If you answered yes to the previous question please give a date and details-

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**ANSWERING YES TO THIS QUESTION DOES NOT CONSTITUTE AN AUTOMATIC BAR TO EMPLOYMENT, FACTORS SUCH AS DATE OF OFFENCE, SERIOUSNESS, AND NATURE OF THE VIOLATION, REHABILITATION AND POSITION APPLIED FOR WILL BE TAKEN INTO ACCOUNT; WHEN AN EMPLOYMENT DISCUSSION IS MADE.**

## **Employment Record**

Note: DOT requires that employment for at least 3 years and/ or commercial driving experience for the past 10 years be shown

***Last Employer***    **Name-** \_\_\_\_\_

**Address-** \_\_\_\_\_

**Position Held-** \_\_\_\_\_ **From-** \_\_\_\_\_ **To-** \_\_\_\_\_ **Salary-** \_\_\_\_\_

**Reason For Leaving-** \_\_\_\_\_ **Telephone-** \_\_\_\_\_

**2<sup>nd</sup> Last  
Employer**

Name- \_\_\_\_\_

Address- \_\_\_\_\_

Position Held- \_\_\_\_\_ From- \_\_\_\_\_ To- \_\_\_\_\_ Salary- \_\_\_\_\_

Reason For Leaving- \_\_\_\_\_ Telephone- \_\_\_\_\_

**3<sup>rd</sup> Last  
Employer**

Name- \_\_\_\_\_

Address- \_\_\_\_\_

Position Held- \_\_\_\_\_ From- \_\_\_\_\_ To- \_\_\_\_\_ Salary- \_\_\_\_\_

Reason For Leaving- \_\_\_\_\_ Telephone- \_\_\_\_\_

**Schooling**

School	Name and Address	Course of Study	Years Completed	Diploma/ Degree
High School				
College				
Other				

**Personal References (Do Not Include Family Members)**

Name	Phone	Best Time to Call	Occupation
1.			
2.			
3.			

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Tremmel-Anderson Trucking has appointed Theresa Tremmel-Anderson as the EEO Officer. Any suspected violations of this policy should be reported to her as soon as possible, or a complaint maybe filed directly with the appropriate agencies lists can be acquired from Theresa Tremmel-Anderson.

By signing below you are certifying that this application was completed by you, and that all entries on it and information in it are true and complete to the best of your knowledge.

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Applicants Signature

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Date

This Authorization and Release gives your permission to Tremmel-Anderson Trucking Human Resources to conduct a background investigation on behalf of Tremmel-Anderson Trucking. Complete background checks are necessary as a condition of employment. The result of this process will be utilized by Tremmel-Anderson Trucking to determine eligibility for employment. All information will be proprietary and kept as confidential as practicable. The information obtained by Tremmel-Anderson Trucking will not be provided to any parties other than this company.

I, the undersigned, do hereby certify that the information provided by me in my application for employment, resume, or in verbal discussions relating to my consideration for employment is true and complete to the best of my knowledge. I hereby authorize Tremmel-Anderson Trucking Human Resources to: (1) investigate the truthfulness of all my statements made on my application or resume, or verbal statements made by me in the interview process, (2) conduct any verification of my education, employment, personal, credit, and motor vehicle records, and to receive any criminal history reports, and (3) disclose verbally or in writing the results of any investigation with the authorized employees or agents of this company, involved in the hiring process.

Further, I authorize the procurement of any other information, which relates to my background, character, and personal reputation, which may be deemed relevant to my employment in accordance with state and federal laws.

I have read and understand this Authorization and Consent. The original or copy of this document serves as my valid authorization to any and all persons, educational institutions, past and/or current employers, organizations, credit agencies, law enforcement or criminal records agencies, and other agencies to release information about me to Tremmel-Anderson Trucking, or its designated agent, and hereby release and hold harmless all such persons, institutions, agencies, employers, and organizations providing such information from liability and any or all claims and damages connected with providing any requested information.

I further agree to indemnify, discharge, and forever hold harmless Tremmel-Anderson Trucking, its directors, officers or employees from any and all damages, claims, losses, liabilities, costs, and expenses (including, but not limited to attorney's fees) incurred as a direct or indirect result of any lawsuit or administrative proceeding brought against Tremmel-Anderson Trucking, related directly or indirectly to the disclosure of any such information or to such investigation. I understand that my employment with Tremmel-Anderson Trucking is conditional upon an acceptable background investigation.

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Applicants Signature

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Date



# Tremmel-Anderson Trucking LLC

Name: \_\_\_\_\_  
(Please Print)

## AFFIRMATIVE ACTION VOLUNTARY IDENTIFICATION

Tremmel-Anderson Trucking LLC is a government contractor. A requirement for Federal or Federally Assisted Construction Contracts is to report the number of handicapped, veteran, male/female, and minority/non-minority employees and applicants we have.

SUBMISSION OF THE INFORMATION REQUESTED BELOW IS STRICTLY VOLUNTARY.

### Referral Sources:

Advertisement  
 Employee  
 Relative  
 Walk-in  
 Other  
 Government Employment Agency  
 Private Employment Agency  
Name of referral source (if applicable) \_\_\_\_\_  
Special Disabled Veteran

### What is your race/ethnic origin?

White  
 Black or African American  
 Hispanic or Latino  
 Asian  
 Native Hawaiian or Other Pacific Islander  
 American Indian or Alaska Native  
 Two or More Races

### What is your Gender?

Female  
 Male

### Are you disabled/handicapped?

Yes  
 No

- A veteran who is entitled to compensation under laws administered by the Dept. of Veterans Affairs for a disability.
  - o Rated at 30% or more; or
  - o Rated at 10% to 20% in the case of a veteran who has been determined under Section 1506 of Title 38 USC to have a serious employment handicap; or
- A person who was discharged or released from active duty because of a service connected disability.

Veteran of the Vietnam-Era - A person who served more than 180 days of active military service, any of which was during the period 8-5-1964 through 5-7-1975, and was discharged or released with an honorable discharge or was discharged or released because of a service-connected disability.

Other Veterans - A person who served on active duty during a war; or a person who served in a campaign or expedition for which a campaign badge, a service medal or an expeditionary medal has been awarded.

Newly Separated Veteran - A person who served on active during the one-year period beginning on the date of such veteran's discharge or release from active duty.

Discharge Date: \_\_\_\_\_ (To be completed by all veterans).

This information will be used only for Affirmative Action reporting purposes and will not become part of your employment file or application, nor will it be used as a basis for any personnel action.

Submission of this information is confidential, and is solicited on a strictly voluntary basis. Your decision to provide the information will not result in any adverse treatment.

I decline to provide this information

Tremmel-Anderson Trucking LLC is an Equal Opportunity / Affirmative Action Employer and does not discriminate on the basis of race, color, creed, religion, national origin, ancestry, sex, sexual orientation, disability, age, marital status, pregnancy or childbirth, use of lawful products, arrest or conviction record, honesty testing, genetic testing or information, military service membership, status with regard to public assistance, local human rights commission activity, gender identity, height, weight or other basis prohibited by applicable local, state or federal fair employment laws or regulations.

\_\_\_\_\_  
Date: \_\_\_\_\_

Signature

"Tremmel-Anderson Trucking is an Equal Opportunity Employer"

# **Tremmel-Anderson Trucking LLC**

**W276 N6746 Moraine Dr.**

**Sussex, WI 53089**

**Office (262) 538-4922 Fax (262) 538-1573**

## **Job Description: Truck Driver Duties include, but are not limited to:**

Driving any designated or instructed dump truck at any requested time or location, day or night shifts. Agreed driving wages will be paid on verified ticket time. During winter months of employment snowplowing & skid steer operations may also be required if employee is qualified (we can train in this area). Sunday - Saturday is the average work week and are considered required work days. When you are done on the job for that day, you are required to call into the office prior to leaving that job, as you may be dispatched to another job.

Checking all fluids, tire pressures & performing a daily pre-trip & post-trip safety inspection is mandatory & required before reporting to job site for the day. You must be physically fit to keep you dump box clean at all times (unless otherwise arranged). General mechanics are encouraged for basic repairs during the work day. Trucks are to be kept CLEAN and orderly. Knowledge of how grease a trucks is also helpful (we are willing to train in this area).

All repairs preformed or needed must be reported to Theresa Tremmel-Anderson. All time performing mechanical duties or miscellaneous work requested by Tremmel-Anderson Trucking LLC. It is the employee's responsibility to turn shop time sheets into Theresa Tremmel-Anderson for payment; if time is not charges it will be assumed as donated time & labor. Salary for shop time & travel time will be disclosed in hiring letter.

Failure to perform required duties may result in a deduction on agreed upon wage in which you were hired. Any reduction in hourly wage will be given after two verbal warnings & will be submitted to employee in writing by Theresa Tremmel-Anderson & placed into employee's file. Days off must be requested in writing. Forms for requests will be kept in office and are available. Approval by Theresa Tremmel-Anderson must be given before taking off.

## **Timesheet Instructions:**

All fuel receipts, weekly tickets & time sheets are expected to be turned in by 6:00 PM Sunday afternoon. Any delay in receiving time sheets can result in delay on weekly paycheck. Post and Pre trip inspection sheets are to be turned in every Wednesday, to allow proper & timely maintenance to be preformed. Any requests for reimbursement must be turned in with time sheets on proper reimbursement form. All reimbursement payments will be dispersed along with weekly payroll checks. All payroll or reimbursement checks will be issued & ready to be released every Monday. Employee must inform employer in what fashion to disperse their weekly payroll checks; mailed or picked up.

# Tremmel-Anderson Trucking LLC

## Request for Check of Driving Record

I hereby authorize you to release the following information to:

**TREMME-ANDERSON TRUCKING LLC. (Employer)** for the purposes of Driver and Fleet Safety.

Should I be hired, I authorize an annual check of my driver's license as mandated by the Federal DOT requirements. You are released from any and all liability which may result from furnishing such information.

\_\_\_\_\_  
(Driver or Prospective Driver's Signature)

\_\_\_\_\_  
(Date)

1. In accordance with the provisions of Section 604 and Section 607 of the Fair Credit Reporting Act (Public Law #91-508) and Section 2724 of the Federal Driver Privacy Protection Act (Public Law #103-322). I hereby certify that the information requested below will be used for a "Permissible purpose" as defined in the Acts, and that the information received will be used for no other purpose.
2. I further certify that if the applicant named below is denied or loses employment based upon the information received, I will identify the source of the report in accordance with Section 615(a) of the Fair Credit Reporting Acts.

\_\_\_\_\_  
(Signature of Requester)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Date)

Theresa Tremmel-Anderson  
(Printed Name)

Tremmel-Anderson Trucking LLC  
(Name of Business)

W276 N6747 Moraine Drive  
(Address)

Sussex,  
(City)

WI  
(State)

53089  
(Zip)

The following employee(s) or perspective employee(s) would be expected to drive a vehicle as part of their employment at our operation. Please furnish the three years of driving record for the driver listed below.

Name of Driver: \_\_\_\_\_

Address: \_\_\_\_\_  
(Number & Street) (City) (State) (Zip)

Former Address: \_\_\_\_\_  
(Number & Street) (City) (State) (Zip)

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Driver's License Number: \_\_\_\_\_

# Tremmel-Anderson Trucking LLC

"An Equal Opportunity Employer"

## Request for DOT Drug and Alcohol Testing Information From Previous Employer

PLEASE RETURN TO:  
**Theresa Tremmel-Anderson**  
**Tremmel-Anderson Trucking LLC**  
**W276 N6746 Moraine Drive**  
**Sussex, Wisconsin 53089**  
**Phone: 262-538-4922**

Name of Previous Employer

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, ST, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_

APPLICANT NAME: \_\_\_\_\_ SSN: \_\_\_\_\_

Pursuant to Federal Regulation 49 CFR part 40.25, please furnish the requested information. I hereby authorize \_\_\_\_\_

(Previous employer's name)

to release the alcohol and controlled substances testing information listed below to the above named company.

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

(Signature of employee)

WITNESS: \_\_\_\_\_ DATE: \_\_\_\_\_

Previous employer must supply the following information regarding the above named individual during the past two years while employed to perform DOT covered safety sensitive functions:

- |  | <u>YES</u> | <u>NO</u> |
|--|------------|-----------|
| 1. Alcohol tests with a result of 0.04 or higher alcohol concentration?                                    | ( )        | ( )       |
| 2. Verified positive drug tests?   | ( )        | ( )       |
| 3. Refusals to be tested (including verified adulterated or substituted drug test results)?                | ( )        | ( )       |
| 4. Other violations of DOT agency drug and alcohol testing regulations?                                    | ( )        | ( )       |
| 5. Did a previous employer report a drug or alcohol rule violation to you?                                 | ( )        | ( )       |
| 6. If the answer is "yes" to any of the above items, did the employee complete the return-to-duty process? | ( )        | ( )       |

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

(Signature of individual supplying information)

If the answer to item #5 is "yes", then you must provide the previous employer's report even though it may be outside the two year time period. If you answered "yes" to item #6, you must also transmit the appropriate return-to-duty documentation (e.g., SAP report(s), follow-up testing records, etc.). If you referred the individual to a Substance Abuse Professional please supply the following information.

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, ST. ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

**REQUEST FOR DOT DRUG AND ALCOHOL TESTING INFORMATION FROM  
PREVIOUS EMPLOYER**

**EFFECTIVE AUGUST 1, 2001**, 49 CFR part 40, U.S. Department of Transportation, Procedures for Transportation Workplace Drug and Alcohol Testing Programs requires employers to do a background check of all new employees hired (or current employees transferred) to perform safety sensitive covered functions.

**§40.25 Must an employer check on the drug and alcohol testing record of employees it is intending to use to perform safety-sensitive duties?**

(a) Yes, as an employer, you must, after obtaining an employee's written consent, request the information about the employee listed in paragraph (b) of this section. This requirement applies only to employees seeking to begin performing safety-sensitive duties for you for the first time (i.e., a new hire, an employee transfers into a safety-sensitive position). If the employee refuses to provide this written consent, you must not permit the employee to perform safety-sensitive functions.

(b) You must request the information listed in this paragraph (b) from DOT-regulated employers who have employed the employee during any period during the two years before the date of the employee's application or transfer:

- (1) Alcohol tests with a result of 0.04 or higher alcohol concentration;
- (2) Verified positive drug tests;
- (3) Refusals to be tested (including verified adulterated or substituted drug test results);
- (4) Other violations of DOT agency drug and alcohol testing regulations; and
- (5) With respect to any employee who violated a DOT drug and alcohol regulation, documentation of the employee's successful completion of DOT return-to-duty requirements (including follow-up tests). If the previous employer does not have information about the return-to-duty process (e.g., an employer who did not hire an employee who tested positive on a pre-employment test), you must seek to obtain this information from the employee.

(c) The information obtained from a previous employer includes any drug or alcohol test information obtained from previous employers under this section or other applicable DOT agency regulations.

(d) If feasible, you must obtain and review this information before the employee first performs safety-sensitive functions. If this is not feasible, you must obtain and review the information as soon as possible. However, you must not permit the employee to perform safety-sensitive functions after 30 days from the date on which the employee first performed safety-sensitive functions, unless you have obtained or made and documented a good faith effort to obtain this information.

(e) If you obtain information that the employee has violated a DOT agency drug and alcohol regulation, you must not use the employee to perform safety-sensitive functions unless you also obtain information that the employee has subsequently complied with the return-to-duty requirements of Subpart O of this part and DOT agency drug and alcohol regulations.

(f) You must provide to each of the employers from whom you request information under paragraph (b) of this section written consent for the release of the information cited in paragraph (a) of this section.

(g) The release of information under this section must be in any written form (e.g., fax, e-mail, letter) that ensures confidentiality. As the previous employer, you must maintain a written record of the information released, including the date, the party to whom it was released, and a summary of the information provided.

(h) If you are an employer from whom information is requested under paragraph (b) of this section, you must, after reviewing the employee's specific, written consent, immediately release the requested information to the employer making the inquiry.

(i) As the employer requesting the information required under this section, you must maintain a written, confidential record of the information you obtain or of the good faith efforts you made to obtain the information. You must retain this information for three years from the date of the employee's first performance of safety-sensitive duties for you.

(j) As the employer, you must also ask the employee whether he or she has tested positive, or refused to test, on any pre-employment drug or alcohol test administered by an employer to which the employee applied for, but did not obtain, safety-sensitive transportation work covered by DOT agency drug and alcohol testing rules during the past two years. If the employee admits that he or she had a positive test or a refusal to test, you must not use the employee to perform safety-sensitive functions for you, until and unless the employee documents successful completion of the return-to-duty process (see paragraphs (b)(5) and (e) of this section).