

Fill out this form, print it and fax to: (614) 875-3202.

Also, include 3 job references, a completed Form I-9 and a copy of you insurance paid current.

PERSONAL

Name

Address

Phone 1

Phone 2

E-Mail

TRAINING & BACKGROUND

Licenses?

Certifications?

How long have you been a sub contractor?

Expertise?

(Ex: plumbing, electrical, HVAC, etc)

Do you have any physical conditions affecting your ability to perform any of these expertise items you have listed above? Yes No

Explain:

ADDITIONAL INFO

Do you carry liability insurance? Yes No

If yes, how much?

Do you carry Worker's Comp? Yes No

Are you bonded? Yes No

Do you have reliable transportation? Yes No

Do you have a valid drivers license? Yes No

Driver's Licences #? Expires State

Do you have your own tools? Yes No

Have you been convicted of a felony? Yes No
If yes, explain:

I do hereby authorize U-Turn Properties, LLC to contact my former employers and references given and to investigate the information I have provided in this application. I represent that I have fully and accurately answered each question. I understand misrepresentation or omission of material facts in this application may result in rejection of this application. I also acknowledge that if I am employed, such employment will be at the will of my employer for no definite period and I may be dismissed without cause, pursuant to applicable law.

I AGREE

I DISAGREE

Signature: _____

Date: _____