



**Southern Tank Transport, Inc.**  
**BACKGROUND CHECK PERMISSION**

I certify that I have read and understand all of this employment application. It is agreed that Southern Tank Transport, Inc. or its agents 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 Southern Tank Transport, Inc., its agents and other persons named herein from all liability for any damages on account of furnishing such information. I understand that as an applicant for a position with Southern Tank Transport, Inc., 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/or 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 Southern Tank Transport, Inc. and for no other reason.

It is agreed and understood that under the Fair Credit Reporting Act, Public Law 97-508, 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 may result in my rejection or dismissal. If hired, I agree to abide by all the rules and policies of Southern Tank Transport, Inc.

My signature below certifies that I completed this application and that all entries on it and all information in it are complete and true, to the best of my knowledge.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Date

**GENERAL CONSENT AND RELEASE TO BE DRUG AND/OR ALCOHOL TESTED**

I, \_\_\_\_\_ hereby authorize Southern Tank Transport, Inc. to conduct any and all drug and/or alcohol tests on me as required by regulations of the United States Department of Transportation and the terms and conditions of the Company's drug and alcohol abuse policy, whose terms and conditions I have read and understand and have consented to abide by. In furtherance of this, I hereby authorize the medical or health care facility designated by the Company, its physicians, nurses, and technicians, to withdraw specimens of my urine and/or blood for the purpose of determining the illegal presence, content and quantity of controlled substances in my body. I also authorize the medical or health care facility and its trained breath alcohol technicians to take specimens of my breath for the purpose of determining the illegal presence and content of alcohol in my body.

In executing this Consent and Release, I understand and agree that my drug and/or alcohol test results must be disclosed to my Company's Medical Review Officer (in the event of a drug test) and the Company, its physicians, nurses, technicians, and any other of its employees or agents properly involved with my tests from any and all claims or causes of actions which may result from the disclosure of those test results.

I hereby further consent and agree to waive any physician/patient privilege that may otherwise exist with respect to the confidentiality of my drug test results.

Date \_\_\_\_/\_\_\_\_/20\_\_\_\_

\_\_\_\_\_  
Applicant's Name (print)

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Name and Title