

TRUCK DRIVER NATION

INDEPENDENT TRUCK DRIVER RECRUITER BUSINESS REGISTRATION & TAX VERIFICATION FORM

This form is required for legal, tax, compliance, and identity verification purposes in compliance with federal and state regulations. All information must be accurate and truthful. Providing false information may result in immediate termination and legal action.

| | |
|---|-------|
| Legal Name: | _____ |
| Business Name / LLC (if any): | _____ |
| SSN or EIN: | _____ |
| Type of Business (Sole Proprietor / LLC / Corporation): | _____ |
| State of Registration / Incorporation: | _____ |
| MC Number (if applicable): | _____ |
| DOT Number (if applicable): | _____ |

| | |
|------------------------------|-------|
| Street Address: | _____ |
| City / State / ZIP: | _____ |
| Primary Phone: | _____ |
| Email Address: | _____ |
| Government ID Type & Number: | _____ |
| State of Issuance: | _____ |

LEGAL CERTIFICATION & ACKNOWLEDGMENT

I certify under penalty of perjury that all information provided in this form is true, correct, and complete. I understand this information is required for identity verification, tax reporting, fraud prevention, regulatory compliance, and enforcement of contractual obligations with Truck Driver Nation. I acknowledge that any misrepresentation, falsification, or omission of information may result in immediate termination of all contracts, forfeiture of compensation, and legal action. I authorize Truck Driver Nation to verify this information with any government agency, financial institution, or regulatory body as permitted by law.

| | |
|--------------------------|-------|
| Signature: | _____ |
| Printed Name: | _____ |
| Date: | _____ |
| IP Address (If Digital): | _____ |

FOR TRUCK DRIVER NATION INTERNAL USE ONLY

| | |
|-----------------------|-------|
| Reviewed By: | _____ |
| Authorized Signature: | _____ |
| Approval Date: | _____ |
| Internal File Number: | _____ |