



Shipperz Towing & Recovery, LLC

Employment Application

Thank you for your interest in joining Shipperz Towing & Recovery, LLC.

Please complete this application fully and accurately. Incomplete applications may delay processing.

Applicant Information

Full Legal Name: _____

Preferred Name (if different): _____

Phone Number: _____

Email Address: _____

Current Address: _____

City _____ State _____ Zip _____

Are you legally authorized to work in the United States? Yes No

Are you at least 21 years of age? Yes No

Position Information

Position Applied For: _____

Employment Type: Full-Time Part-Time On-Call

Desired Start Date: _____

Are you willing to work: Nights Weekends Holidays Overtime On-Call Rotations

Driver & Licensing Information

Driver's License State: _____

License Number: _____

Expiration Date: _____

Issue Date: _____

License Class: D C B A

Endorsements (if any): _____

Have you ever had a license suspended or revoked? Yes No

If yes, explain (dates and reason): *see next page*

DOT Physical/Medical Cert

Do you have a DOT Physical: Yes No

If Yes, Valid until: _____

If No, please note a VALID DOT Medical clearance is required for employment.

Driving & Accident History (Past 5 Years)

Have you been involved in any motor vehicle accidents? Yes No

If yes, list details (date, location, fault determination):

Have you received any traffic violations? Yes No

If yes, list details:

Tow & Recovery Experience

Do you have prior towing or roadside assistance experience? Yes No

If yes, complete the following:

Years of Experience: _____

Types of Equipment Operated (check all that apply):

- Flatbed Wrecker Medium Duty Heavy Duty Dollies Accident Recovery
 Enclosed Trailer Work

Experience With (check all that apply):

- Luxury / Exotic Vehicles
 Electric Vehicles
 Low Profile Vehicles
 Long-Distance
Transport
 Off-Road / Winch-Outs

Describe your towing/recovery experience in detail:

Employment History

(List your **three most recent employers**, starting with the most recent on next page.)

Employer #1

Company Name: _____

Job Title: _____

Start Date: _____ **End Date:** _____

Supervisor Name & Phone: _____

Reason for Leaving: _____

Employer #2

Company Name: _____

Job Title: _____

Start Date: _____ **End Date:** _____

Supervisor Name & Phone: _____

Reason for Leaving: _____

Employer #3

Company Name: _____

Job Title: _____

Start Date: _____ **End Date:** _____

Supervisor Name & Phone: _____

Reason for Leaving: _____

Skills & Qualifications

Please check all that apply or attach a current resume:

- Strong customer service skills
- Mechanical knowledge
- GPS / dispatch system experience
- Ability to lift 75+ lbs
- Comfortable working in high-stress situations
- Ability to work under minimal supervision
- Attached Resume

Additional skills or certifications:

Availability & Work Ethic

1. How do you handle high-pressure or emergency situations?

1. Describe your approach to customer service:

1. What does professionalism mean to you in this line of work?

References

Please list **three professional references** (no family members).

Reference #1

Name: _____

Company/Title: _____

Phone: _____

Relationship: _____

Reference #2

Name: _____

Company/Title: _____

Phone: _____

Relationship: _____

Reference #3

Name: _____

Company/Title: _____

Phone: _____

Relationship: _____

Background & Consent

Have you ever been convicted of a felony? Yes No

(Conviction does not automatically disqualify employment.)

If yes, explain:

Applicant Certification

I certify that the information provided in this application is true and complete to the best of my knowledge. I understand that false or misleading information may result in disqualification or termination of employment.

I authorize Shipperz Towing & Recovery, LLC to verify information provided, including employment history, driving records, and references. Background check authorization will be provided as a separate form. Please return this completed application, copy of driver's license, and DOT Medical Certification.

Applicant Signature: _____

Date: _____

Shipperz Towing & Recovery, LLC is an Equal Opportunity Employer.

Background Search Form will be sent via a DocuSign form.