

FOR OFFICE USE ONLY

Hard Hat _____
Safety Glasses: B __ C__ Y__
Vest_____ String_____

Employee Name: _____

Employee Number: _____



530 Bercut Dr, Ste G, Sacramento, CA 95811
Phone (916) 852-6030; Fax (916) 852-7258 Lic. # 899568

It is the policy of Concrete Value Corp. that every employee is entitled to a safe and healthful workplace.

We at Concrete Value Corp. have a responsibility to make safety a part of our daily business. We will be counting on you to do your part in making our program an effective one.

The management concept of Concrete Value Corp. is *production with safety*. The success of Concrete Value Corp. will depend not only on sales and service, but on how safely each job is performed. There is no job so important or urgent that we cannot take time to work safely. I consider the safety of our employees to be of prime importance, and I expect your cooperation in making our program effective.

Sincerely,

Paul T. Esch
President
Concrete Value Corp.

EMPLOYMENT HISTORY

Company Name:	Telephone ()
Address:	Employed (State, month, and year) From: To:
1 Name of Supervisor:	Weekly pay Start: Last:
State Job Title and Describe Your Work:	Reason for leaving:

Company Name:	Telephone ()
Address:	Employed (State, month, and year) From: To:
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State Job Title and Describe Your Work:	Reason for leaving:

We may contact the employer listed above unless you indicate those you do not want us to contact.

Employer Number(s)	Reason:

MILITARY	Did you serve in the U.S. Armed Forces? Yes ____ No ____	If Yes, in what Branch?
Describe any training received relevant to the position for which you are applying.		

PERSON TO CONTACT IN CASE OF AN EMERGENCY _____

RELATIONSHIP TO YOU _____

ADDRESS: _____

HOME NUMBER, PAGER, CELL PHONE _____

Concrete Value Corp.
 530 Bercut Dr, Suite G, Sacramento, CA 95811
 Phone (916) 852-6030 Fax (916) 852-7258

APPLICATION FOR EMPLOYMENT

Date:	Home Phone Number:	Alternative Phone number:
Last Name:	First:	Middle:
Street Address:		
City:	State:	Zip:
Have you previously been employed with CVC? _____		
If yes, please give dates: _____		Reason for leaving? _____
Position Desired? _____	Rate Desired? _____	
Are you available to work full-time? _____		
Are you at least 18 years of age? _____		
Are you legally eligible for employment in the United States? _____		
Do you have a valid California driver's License? _____		# _____
Have you been referred by a CVC employee? If so, please include his/her name: _____		
EDUCATION		
	Name and Location of School	Subjects Studies/Graduated
High School	_____	_____
College	_____	_____
Other	_____	_____
Other special training or skills? (Languages, Machine Operation, Etc.)		

CVC is an Equal Opportunity Employer

ADDITIONAL INFORMATION

Have you ever been convicted of a felony or of any crime for which you served a jail or prison sentence?

(Do not include convictions under Health and Safety Code sections 11357(b) or (c), 11360(b) 11364, 11365, or 115500 related to marijuana, which occurred two, or more years ago, or referrals to any pre-trial or post-trial diversion program.)

Are you currently awaiting trial for any criminal offense?

Have you ever initiated an act of violence in the workplace?

A "yes" answer to these questions will not necessarily disqualify you. Please explain any "yes" answer so that individual circumstances can be considered. Use additional paper if necessary. _____

No offer of employment at Concrete Value Corp. is final until a prospective employee has passed the company's physical examination. The examining may include laboratory testing of urine sample from a prospective employee to determine the presence of certain drugs and/or alcohol in the body.

Please note: You should not rely upon a contingent offer of employment from Concrete Value Corp. or otherwise engage in any activity based upon a contingent offer of employment. Unless or until final offer of employment is made, you should not take any action which could result in financial loss if a contingent offer is withdrawn, such as giving notice of intent to terminate current employment, selling real estate, or incurring any other costs associated with accepting employment with Concrete Value Corp.. No such activity should be undertaken until after medical clearance has been received and you have received a final offer of employment from Concrete Value Corp.. Under no circumstances should you report to work before medical clearance is received.

It is Concrete Value Corp.'s policy to fill every position without regard to race, color religion, creed, sex, marital status, age, national origin, ancestry, disability, medical condition, sexual orientation or any other consideration made unlawful any applicable federal, state, or local; laws. Concrete Value Corp. is an equal opportunity employer and selects employees on the basis of qualifications. Please contact the Concrete Value Corp. if you have any questions or complaints regarding this policy.

If Concrete Value Corp. employs me, I agree to conform to the rules and regulations of Concrete Value Corp.. I also understand and agree that, except for arbitration and employment at-will status, my wages, hours, working conditions, job assignments and compensation are subject to change by Concrete Value Corp..

I understand my employment can be terminated, with or without cause and with or without notice, at any time at the option of Concrete Value Corp. or myself. I understand that, other than the President of Concrete Value Corp., no manager, supervisor or representative of Concrete Value Corp. has authority to enter into any agreement for employment for any special period of time, or to make any agreement contrary to at-will employment. Only the President of Concrete Value Corp. has the authority to change my at-will status, and then only in a writing expressly changing my at-will status.

My signature below certifies that I have read and understand this application, and to the best of my knowledge the information I provided is true and correct. My signature below also certifies that I agree to be bound by the terms and conditions of employment stated in this application. This application contains all the understandings and agreements between Concrete Value Corp. and I, concerning the nature of my employment, if any, by Concrete Value Corp. and, supersedes all prior and/or current practices, oral or written agreements, representations and promises, express or implied, between Concrete Value Corp. and I. I understand and agree this sets forth the entire agreement between the parties and fully supersedes any and all prior agreements or understandings, written or oral, between the parties pertaining to the subject matter hereof

Applicant Signature and Date

Credit Report Authorization and Consent Form (to be completed by applicants)
Please Print or Type

Last Name _____ First _____ Middle _____

Driver's License Number _____ State of Issue _____

Present Address _____

City/State/Zip _____

I understand that in connection with my application for employment with the Concrete Value Corp. ("the Company"), the Company will use an outside agency to research and verify the information I have provided on my application for employment, including my driving record, an assessment of my insurability under the Company's insurance policy, personal background, character, professional standing, work history and qualifications. This agency will provide a report to the Company. The Company uses Bozzuto Insurance Agency, 9274 Madison Avenue, Orangevale, CA 95662, as an agent to perform background verifications. I understand I will be notified within three (3) days of the date the Company requests the background investigation.

I understand that Bozzuto Insurance Agency will obtain information it deems appropriate from various sources including, but not limited to, the following: credit reporting agencies, current and past employers, criminal conviction records, Department of Motor Vehicle records, military records, school records, and professional and personal references. I authorize, without reservation, any individual, corporation or other private or public entity to furnish the Company and Bozzuto Insurance Agency all information about me. I unconditionally release and hold harmless any individual, corporation, or private or public entity from any and all causes of action that might arise from furnishing to the Company and/or Bozzuto Insurance Agency information that they may request pursuant to this release. I understand the Company will provide copy of the investigative report within seven (7) days of the date the Company receives a copy of the investigative report and the name and address of the investigating agency.

I further understand, pursuant to California Civil Code section 1786.22, the files maintained by my employer and/or investigative consumer reporting agency shall be available to me by either a visual inspection, with proper identification, a copy of which may be provided to me at a reasonable cost as permitted by law; by certified mail, if I make a written request, with proper identification; or by a summary of all information contained in the files by telephone, if I make a written request, with proper identification. I understand trained personnel will be provided to explain the information contained in my file. I understand I will be provided a written explanation of any coded information contained in my file. I understand I shall be permitted to be accompanied by one other person of my choosing, who shall furnish reasonable identification of himself or herself, to review my file. I understand I may be required to provide a written statement granting permission to my employer and/or the consumer reporting agency to discuss the consumer's file in such person's presence.

This authorization and release, in original, faxed, photocopied or electronic form, shall be valid for this and any future reports and updates that may be requested by the Company.

Dated: _____ Applicant's Signature _____

Print Name _____

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) is designed to promote accuracy, fairness, and privacy of information in the files of every “consumer reporting agency” (CRA). Most CRAs are credit bureaus that gather and sell information about you — such as if you pay your bills on time or have filed bankruptcy — to creditors, employers, landlords and other businesses. You can find the complete text of the FCRA, 15 U.S.C. 1681-1681u, at the Federal Trade Commission’s web site (<http://www.ftc.gov>). The FCRA gives you specific rights, as outlined below. You may have additional rights under state law. You may contact a state or local consumer protection agency or a state attorney general to learn those rights.

- **You must be told if information in your file has been used against you.** Anyone who uses information from a CRA to take action against you — such as denying an application for credit, insurance or employment — must tell you, and give you the name, address and phone number of the CRA that provided the consumer report.
- **You can find out what is in your file.** At your request, a CRA must give you the information in your file, and a list of everyone who has requested it recently. There is no charge for the report if a person has taken action against you because of information supplied by the CRA, if you request the report within 60 days of receiving notice of the action. You are also entitled to one free report every twelve months upon request if you certify that (1) you are unemployed and plan to seek employment within 60 days, (2) you are on welfare, or (3) your report is inaccurate due to fraud. Otherwise, a CRA may charge you up to eight dollars.
- **You can dispute inaccurate information with the CRA.** If you tell a CRA that your file contains inaccurate information, the CRA must investigate the items (usually within 30 days) by presenting to its information source all relevant evidence you submit, unless your dispute is frivolous. The source must review your evidence and report its findings to the CRA. (The source also must advise national CRAs — to which it has provided the data — of any error.) The CRA must give you a written report of the investigation, and a copy of your report if the investigation results in any change. If the CRA’s investigation does not resolve the dispute, you may add a brief statement to your file. The CRA must normally include a summary of your statement in future reports. If an item is deleted or a dispute statement is filed, you may ask that anyone who has recently received your report be notified of the change.
- **Inaccurate information must be corrected or deleted.** A CRA must remove or correct inaccurate or unverified information from its files, usually within 30 days after you dispute it. **However, the CRA is not required to remove accurate data from your file unless it is outdated (as described below) or cannot be verified.** If your dispute results in any change to your report, the CRA cannot reinsert into your file a disputed item unless the information source verifies its accuracy and completeness. In addition, the CRA must give you a written notice telling you it has reinserted the item. The notice must include the name, address and phone number of the information source.
- **You can dispute inaccurate items with the source of the information.** If you tell anyone — such as a creditor who reports to a CRA — that you dispute an item, they may not then report the information to a CRA without including a notice of your dispute. In addition, once you’ve notified the source of the error in writing, it may not continue to report the information if it is, in fact, an error.
- **Outdated information may not be reported.** In most cases, a CRA may not report negative information that is more than seven years old; ten years for bankruptcies.
- **Access to your file is limited.** A CRA may provide information about you only to people with a need recognized by the FCRA — usually to consider an application with a creditor, insurer, employer, landlord or other business.
- **Your consent is required for reports that are provided to employers, or reports that contain medical information.** A CRA may not give out information about you to your employer, or prospective employer, without your written consent. A CRA may not report medical information about you to creditors, insurers or employers without your permission.
- **You may choose to exclude your name from CRA lists for unsolicited credit and insurance offers.** Creditors and insurers may use file information as the basis for sending you unsolicited offers of credit or insurance. Such offers must include a toll-free phone number for you to call if you want your name and address removed from future lists. If you call, you must be kept off the lists for two years. If you request, complete and return the CRA form provided for this purpose, you must be taken off the lists indefinitely.
- **You may seek damages from violators.** If a CRA, a user or (in some cases) a provider of CRA data, violates the FCRA, you may sue them in state or federal court.