



1822 Green Ridge Road  
Tampa, Florida 33619-4963

(813) 252-8704 Office  
(813) 966-9447 Cell  
(813) 925-6921 Fax

tcoblogistics@gmail.com

### APPLICANT INFORMATION

DATE 5/1/2016 Position applying for: Contractor Driver Contractor's Driver  
NAME Ivan Llorente Landeau  
PHONE ( 813 ) 785-3409 EMERGENCY PHONE ( 813 ) 966-9447  
AGE 46 DATE OF BIRTH 5/21/1969 SS# 077-64-6302  
*(The Age Discrimination of Employment Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 but less than 70 years of age.)*

PHYSICAL EXAM EXPIRATION DATE 9/16/2016

#### CURRENT & PREVIOUS THREE YEARS ADDRESSES:

308 North Howard Avenue, Tampa, FL 33606 FROM 2000 TO Present  
FROM TO  
FROM TO

HAVE YOU WORKED FOR THIS COMPANY BEFORE? ☒ Yes ☐ No

If yes, give dates: From 2008 To Present

Reason for leaving? Had back injury

#### EDUCATION HISTORY:

Please circle the highest grade completed:

Grade school: 1 2 3 4 5 6 7 8 9 10 11 12  
College: 1 2 3 4 Post Graduate: 1 2 3 4

#### EMPLOYMENT HISTORY:

Give a COMPLETE RECORD of all employment for the past three (3) years, including any unemployment or self employment periods, and all commercial driving experience for the past ten (10) years.

Mo/Yr Mo/Yr Present or Last Employer  
From 10/2008 To Present Name TCOB Trucking LLC

Position Held Driver Address 1822 Green Ridge Road, Tampa, FL 33619

Reason for leaving Back injury Company phone ( 813 ) 966-9447

Were you subject to the FMCSRs while employed here? ☒ Yes ☐ No

Was your job designated as a safety-sensitive function in any DOT- regulated mode subject to the drug and alcohol testing requirements of 49 CFR Part 40? ☒ Yes ☐ No

Mo/Yr Mo/Yr Present or Last Employer  
From To Name

Position Held Address

Reason for leaving Company phone ( )

Were you subject to the FMCSRs while employed here? Yes No

Was your job designated as a safety-sensitive function in any DOT- regulated mode subject to the drug and alcohol testing requirements of 49 CFR Part 40? Yes No



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### DRIVING EXPERIENCE

Class of Equipment	From	To	Approximate Number of Miles
Straight Truck			
Tractor & Semi-trailer	1994	Present	1 million
Tractor & two trailers			
Tractor & triple trailers			
Other			

List states operated in, for the last five (5) years: 48 states and Canada

List special courses/training completed (PTD/DDC, HAZMAT, ETC) \_\_\_\_\_

List any Safe Driving Awards you hold and from whom: \_\_\_\_\_

### Accident Record for past three (3) years: (attach sheet if more space is needed):

Date of Accident	Nature of Accidents (Head on, rear end, etc)	Location of Accident	# of Fatalities	# of People Injured

### Traffic Convictions and Forfeitures for the last three (3) years (other than parking violations):

Date	Location	Charge	Penalty

### Driver's License (list each driver's license held in the past three(3) years:

State	License	Type	Endorsements	Expiration Date
FL	L653-400-69-181-0	CDL	Hazmat	5/21/2018

Have you ever been denied a license, permit or privilege to operate a motor vehicle? \_\_\_\_\_ Yes \_\_\_\_\_ ☒ No

Has any license, permit or privilege ever been suspended or revoked? \_\_\_\_\_ Yes \_\_\_\_\_ ☒ No

Is there any reason you might be unable to perform the functions of the job for which you have applied (as described in the job description)? \_\_\_\_\_ Yes \_\_\_\_\_ ☒ No

Have you ever been convicted of a felony? \_\_\_\_\_ Yes \_\_\_\_\_ ☒ No

If the answers to any questions listed above are "yes", give details \_\_\_\_\_



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### Job References

List three (3) persons for references, other than family members, who have knowledge of your safety habits.

Name Not Needed Address \_\_\_\_\_ Phone \_\_\_\_\_  
Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_  
Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

### To Be Read and Signed by Applicant:

*It is agreed and understood that any misrepresentation given on this application shall be considered an act of dishonesty.*

*It is agreed and understood that the motor carrier or his agents may investigate the applicant's background to obtain any and all information of concern to applicant's record, whether same is of record or not, and applicant releases employers and person named herein from all liability for any damages on account of his furnishing such information.*

*It is also agreed and understood that under the Fair Credit Reporting Act, Public Law 91-508, I have been told that this investigation may include an investigating 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 application file.*

*It is agreed and understood that this Application in no way obligates the motor carrier to employ or hire the applicant.*

*It is agreed and understood that if qualified and hired, I may be on a probationary period during which time I may be disqualified without recourse.*

*This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge.*

**Applicant Signature** Ivan Llorente **Date** 5/1/2016

### Remarks: (For office use only)

This application is just for record keeping.  
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