

SUNSHINE CAR CARE, LLC,
d/b/a Super-Lube, Auto & Tire Super-Service Center & Super-Splash
APPLICATION FOR EMPLOYMENT

TODAY'S DATE: _____ **SCREENING DATE:** _____

POSITION DESIRED: _____ **AT STATION #:** _____

NAME OF APPLICANT: _____

Applying to work at: ___ Super-Lube ___ Auto & Tire Super-Service Center ___ Super-Splash

AVAILABILITY:

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY

Sunshine Car Care makes no guarantees for full-time or part-time employment. Hours will be assigned as business dictates.

STARTING RATE OF PAY: _____ **CAN YOU WORK AT ANY LOCATION?** _____

WE ARE AN EQUAL OPPORTUNITY EMPLOYER
APPLICANT'S STATEMENT

I understand that if I am hired, my employment will be for no definite period, regardless of the period of payment of my wages. I further understand that in consideration of my employment, I agree to conform to the rules and regulations of Sunshine Car Care, LLC and my employment and compensation can be terminated with or without cause, and with or without notice, at any time by the Company or myself. No one other than an Officer of the Company has the authority to modify this relationship or make any agreement to the contrary. Any such modification or agreement must be in writing and signed by an Officer of the Company.

I understand that the Company reserves the right to require me to submit to a drug test at any time and also reserves the right to require me to submit to an alcohol test and/or medical examination to the extent permitted by law. I authorize the Company to investigate my driving record, my criminal record and my credit history, and I understand that an investigative consumer report may be prepared whereby information is obtained through personal interviews with neighbors, friends and others whom I am acquainted. This inquiry would include information as to my character, general reputation, personal characteristics and mode of living. I understand that I have the right to make a written request within a reasonable period of time to receive additional detailed information about the nature and scope of this investigation.

I further understand that the Company may contact my previous employers and I authorize those employers to disclose to the Company all records and other information pertinent to my employment with them. I also authorize the Company to provide truthful information concerning my employment with it to my future prospective employers and I agree to hold it harmless for providing such information.

I certify that all of the information that I provided on this application and in any interview will be true and accurate. I understand that if I am employed and any such information is later found to be false or misleading in any respect, I will be dismissed.

DO NOT SIGN UNTIL YOU HAVE READ AND UNDERSTAND THIS STATEMENT.

 SIGNATURE OF APPLICANT

 DATE

ALL SECTIONS OF THIS APPLICATION MUST BE COMPLETED. APPLICANTS WHO DO NOT PROVIDE ALL REQUESTED INFORMATION WILL NOT BE CONSIDERED FOR EMPLOYMENT.

PERSONAL INFORMATION (PLEASE PRINT)

Name _____
Last First Middle

Present Address _____
Street City State Zip Code

Telephone # _____ Cell or Other Phone # _____

If you are under 18, and it is required, can you furnish a work permit? Yes No

Have you ever been employed at Super-Lube, Auto & Tire Super-Service Center or Super-Splash before? _____ If yes, please give dates and positions: _____

Do you have any friends or relatives working here? Yes No

If yes, please list: Name _____ Relationship _____

What is your means of transportation to work? _____

Have you ever pled "guilty" or "no contest" to, or been convicted of a crime? Yes No

If yes, please provide date(s) and details (*do not write "will discuss in interview"*) _____

NOTE: Answering "Yes" to this question does not constitute an automatic bar to employment. Only those crimes, which are substantially related to the position you are seeking, will be considered.

DRIVING INFORMATION

Do you have a current valid driver's license? Yes No

State: _____ License No: _____ Exp. Date: _____

Do you have personal automobile insurance? Yes No

Name of Insurance Company: _____

Has your personal automobile insurance ever been canceled? Yes No

If yes, please explain: _____

Have you ever been cited for driving under the influence (DUI) or driving while intoxicated (DWI)?

Yes No If yes, please explain the circumstances: _____

Have you ever been cited for moving traffic violations in the last five (5) years? Yes No

If yes, please list: _____

Offenses, Dates and Locations

EMPLOYMENT HISTORY

Please list the names of your present or previous employers in chronological order with present or last employer listed first. Be sure to account for all periods of time including military service and any period of unemployment. If self-employed, give firms name and supply business references.

<u>Present or Last Employer</u> <hr/> <u>Address</u> <hr/> <u>City, State, Zip Code</u> <hr/> <u>Telephone Number</u> <hr/>	<u>Employed From (Mo/Yr)</u> <hr/> <u>To (Mo/Yr)</u>	<u>Pay Start \$</u> <hr/> <u>Final \$</u>	<u>Title or Position</u> <hr/> <u>Name and Title of Last Supervisor</u>	<u>Reason for Leaving</u> <hr/>
<u>Present or Last Employer</u> <hr/> <u>Address</u> <hr/> <u>City, State, Zip Code</u> <hr/> <u>Telephone Number</u> <hr/>	<u>Employed From (Mo/Yr)</u> <hr/> <u>To (Mo/Yr)</u>	<u>Pay Start \$</u> <hr/> <u>Final \$</u>	<u>Title or Position</u> <hr/> <u>Name and Title of Last Supervisor</u>	<u>Reason for Leaving</u> <hr/>
<u>Present or Last Employer</u> <hr/> <u>Address</u> <hr/> <u>City, State, Zip Code</u> <hr/> <u>Telephone Number</u> <hr/>	<u>Employed From (Mo/Yr)</u> <hr/> <u>To (Mo/Yr)</u>	<u>Pay Start \$</u> <hr/> <u>Final \$</u>	<u>Title or Position</u> <hr/> <u>Name and Title of Last Supervisor</u>	<u>Reason for Leaving</u> <hr/>

If additional space is needed, please provide requested information on a separate piece of paper.

Have you ever been terminated or asked to resign from any job? Yes No

If yes, please explain circumstances: _____

Please explain fully any gaps in your employment history: _____

May we contact your current employer? Yes No

If no, please explain: _____

PREVIOUS EXPERIENCE

Please indicate any actual experience that you have had in any of the following positions.

OFFICE

- Controller
- Office Manager
- Bookkeeper
- Accounts Receivable
- Accounts Payable
- Payroll Clerk
- Data Entry
- Cashier
- Other Office Work

PARTS/CUSTOMER SERVICE

- Manager/Supervisor
- Counter Clerk
- Stocker
- Parts Driver
- Other Parts Job
- Other Cust. Service Job
- Related Military Job

SERVICING AND REPAIR

- Service Manager
- Service Advisor
- Dispatcher
- Shop Foreman
- Mechanic/Technician
- Lubework
- Helper
- Painter/Body Repair
- Get Ready/Prep

EDUCATIONAL BACKGROUND

School Name	Years Completed (circle)	Diploma/Degree	Describe Course of Study or Major	Describe Specialized Training, Experience, Skills and Extra-Curricular Activities
Elementary	4 5 6 7 8			
High School	9 10 11 12			
College/University	1 2 3 4			
Graduate/Professional	1 2 3 4			
Trade or Correspondence				
Other				

EMERGENCY INFORMATION

In case of an accident or other emergency, whom should we contact?

Name: _____

Relationship: _____

Address: _____

Telephone: _____

PERSONAL REFERENCES

NAME	OCCUPATION	ADDRESS (Street, City and State)	TELEPHONE NUMBER	NUMBER OF YEARS KNOWN

This application will be considered active for a maximum of thirty (30) days. If you wish to be considered for employment after that time, you must reapply.

I certify that all of the information that I have provided on this application is true, complete and accurate.

Signature of Applicant

Date

SUNSHINE CAR CARE, LLC
D/B/A SUPER-LUBE, AUTO SUPER-SERVICE CENTER & SUPER-SPLASH CAR WASH

DISCLOSURE AND AUTHORIZATION FORM

SUNSHINE CAR CARE, LLC, (the "Company") may request background information about you from a consumer reporting agency in connection with your employment application and for employment purposes. This information may be obtained in the form of consumer reports and/or investigative consumer reports. These reports may be obtained at any time after receipt of your authorization and, if you are hired by the Company, throughout your employment.

HireRight, Inc., or another consumer reporting agency, will obtain the reports for the Company. HireRight, Inc. is located at 5151 California Avenue, Irvine, CA 92617, and can be contacted at 800-490-7983. The reports may contain information bearing on your character, general reputation, personal characteristics, mode of living and credit standing. The types of information that may be obtained include, but are not limited to: social security number verifications; credit reports; criminal records checks; public court records checks; driving records checks; educational records checks; employment verifications; personal and professional references checks; licensing and certification records checks; drug testing results; etc. The information contained in the reports will be obtained from private and public record sources, including, as appropriate, personal interviews with sources, such as neighbors, friends and associates.

You may request more information about the nature and scope of any investigative consumer reports by contacting Michele Revell in the Human Resources Department at 1311 N. Paul Russell Road, Suite B101, Tallahassee, Florida 32301, phone number (850) 222-5823 ext. 101. A summary of your rights under the Fair Credit Reporting Act is also being provided to you.

ADDITIONAL STATE LAW NOTICES

If you are a California, Maine, New York or Washington applicant, please also note:

CALIFORNIA: Under section 1786.22 of the California Civil Code, you may view the file maintained on you by HireRight during normal business hours. You may also obtain a copy of this file, upon submitting proper identification and paying the costs of duplication services, by appearing at HireRight's offices in person, during normal business hours and on reasonable notice, or by mail. You may also receive a summary of the file by telephone, upon submitting proper identification. HireRight has trained personnel available to explain your file to you, including any coded information. If you appear in person, you may be accompanied by one other person, provided that person furnishes proper identification.

NEW YORK: You have the right, upon request, to be informed of whether or not a consumer report was requested. If a consumer report is requested, you will be provided with the name and address of the consumer reporting agency furnishing the report. You may inspect and receive a copy of the report by contacting that agency.

MAINE: You have the right, upon request, to be informed of whether an investigative consumer report was requested, and if one was requested, the name and address of the consumer reporting agency furnishing the report. You may request and receive from the Company, within five business days of our receipt of your request, the name, address and telephone number of the nearest unit designated to handle inquiries for the consumer reporting agency issuing an investigative consumer report concerning you. You also have the right, under Maine law, to request and promptly receive from all such agencies copies of any such reports.

WASHINGTON STATE: If we request an investigative consumer report, you have the right, upon written request made within a reasonable period of time after your receipt of this disclosure, to receive from us a complete and accurate disclosure of the nature and scope of the investigation we requested. You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.

AUTHORIZATION

I have carefully read and understand this Disclosure and Authorization form and the attached summary of rights under the Fair Credit Reporting Act. By my signature below, I consent to the release of consumer reports and investigative consumer reports prepared by a consumer reporting agency, such as HireRight, Inc., to the Company and its designated representatives and agents. I understand that if the Company hires me, my consent will apply, and the Company may obtain reports, throughout my employment.

I also understand that information contained in my job application or otherwise disclosed by me before or during my employment, if any, may be used for the purpose of obtaining consumer reports and/or investigative consumer reports.

By my signature below, I authorize law enforcement agencies, learning institutions (including public and private schools and universities), information service bureaus, credit bureaus, record/data repositories, courts (federal, state and local), motor vehicle records agencies, my past or present employers, the military, and other individuals and sources to furnish any and all information on me that is requested by the consumer reporting agency.

By my signature below, I certify the information I provided on this form is true and correct. I agree that this Disclosure and Authorization form in original, faxed, photocopied or electronic (including electronically signed) form, will be valid for any reports that may be requested by or on behalf of the Company.

California, Minnesota or Oklahoma applicants only -- You will be provided with a free copy of any consumer reports or investigative consumer reports obtained on you if you check the box below.

I wish to receive a free copy of the report.

Applicant Last Name _____ First _____ Middle _____

Social Security No.* _____ Date of Birth* _____

Present Address _____

City/State/Zip _____

Prior Addresses _____ From: _____ To: _____

_____ From: _____ To: _____

_____ From: _____ To: _____

Driver's License # _____

Applicant Signature _____ Date _____

* This information will be used only for background screening purposes and will not be taken into consideration in any employment decisions.

Para informacion en español, visite www.ftc.gov/credit o escribe a la FTC Consumer Response Center, Room 130-A 600 Pennsylvania Ave., N.W., Washington, DC 20580

**A SUMMARY OF YOUR RIGHTS
UNDER THE FAIR CREDIT REPORTING ACT**

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.ftc.gov/credit or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, DC 20580.**

- You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.ftc.gov/credit for additional information.

- You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.ftc.gov/credit for an explanation of dispute procedures.
- Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer agency may continue to report information it has verified as accurate.

- ❑ **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- ❑ **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- ❑ **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.ftc.gov/credit.
- ❑ **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567-8688.
- ❑ **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- ❑ **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.ftc.gov/credit.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:

TYPE OF BUSINESS:	PLEASE CONTACT:
Consumer reporting agencies, creditors and others not listed below	Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 1-877-382-4357
National banks, federal branches/agencies of foreign banks (word “National” or initials “N.A.” appear in or after bank’s name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 202-452-3693
Savings associations and federally chartered savings banks (word “Federal” or initials “F.S.B.” appear in federal institution’s name)	Office of Thrift Supervision Consumer Complaints Washington, DC 20552 800-842-6929
Federal credit unions (words “Federal Credit Union” appear in institution’s name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 703-519-4600
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Consumer Response Center 2345 Grand Avenue, Suite 100 Kansas City, MO 64108-2638 1-877-275-3342
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation, Office of Financial Management Washington, DC 20590 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator- GIPSA Washington, DC 20250 202-720-7051

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