

**IMPORTANT NOTICE REGARDING BACKGROUND REPORTS FROM THE*****PSP Online Service***

In connection with your application for employment with Sullivan Transportation, Inc. ("Prospective Employer"), Sullivan Transportation, Inc. may obtain one or more reports regarding your driving, and safety inspection history from the Federal Motor Carrier Safety Administration (FMCSA). If the Prospective Employer uses any information it obtains from FMCSA in a decision to not hire you or to make any other adverse employment decision regarding you, Sullivan Transportation, Inc. will provide you with a copy of the report upon which its decision was based and a written summary of your rights under the Fair Credit Reporting Act before taking any final adverse action. If any final adverse action is taken against you based upon your driving history or safety report, Sullivan Transportation, Inc. will notify you that the action has been taken and that the action was based in part or in whole on this report. Sullivan Transportation, Inc. cannot obtain background reports from FMCSA unless you consent in writing. If you agree that Sullivan Transportation, Inc. may obtain such background reports, please read the following and sign below:

I authorize Sullivan Transportation, Inc. ("Prospective Employer") to access the FMCSA Pre-Employment Screening Program (PSP) system to seek information regarding my commercial driving safety record and information regarding my safety inspection history. I understand that I am consenting to the release of safety performance information including crash data from the previous five (5) years and inspection history from the previous three (3) years. I understand and acknowledge that this release of information may assist Sullivan Transportation, Inc. to make a determination regarding my suitability as an employee.

I further understand that neither Sullivan Transportation, Inc. nor the FMCSA contractor supplying the crash and safety information has the capability to correct any safety data that appears to be incorrect. I understand I may challenge the accuracy of the data by submitting a request to <https://dataqs.fmcsa.dot.gov>. If I am challenging crash or inspection information reported by a State, FMCSA cannot change or correct this data. I understand my request will be forwarded by the DataQs system to the appropriate State for adjudication.

I have read the above Notice Regarding Background Reports provided to me by Sullivan Transportation, Inc. and I understand that if I sign this consent form, Sullivan Transportation, Inc. may obtain a report of my crash and inspection history. I hereby authorize Sullivan Transportation, Inc. and its employees, authorized agents, and/or affiliates to obtain the information authorized above.

Date: \_\_\_\_\_ Signature \_\_\_\_\_

Name (Please Print) \_\_\_\_\_