On Time Trucking Inc. 921 Conklin Street Farmingdale, NY 11735 631-694-1154

Date	

## Independent Motor Carrier Application For Employment

Company Name	
Address	
Owner's Name	Phone
US DOT#	MC#
	EIN#
	(Please provide copy of IRS form listing EIN# & company name)
Size of Truck	
Does Truck Have Liftgate	
Truck Registration Exp Date	
(Please provide copy)	
Truck Insurance Exp Date	
Please provide the following:	
* Copy of your truck insurance ID card	
* Copy of your truck certificate issued to On Time Tr	ucking as additional insured
(Please see address above)	
* Copy of your truck declaration/endorsement page	issued to On Time Trucking as additional insured
Worker's Compensation Exp Date	
Please provide the following:	
* Copy of your worker's compensation insurance issue (Please see address above)	ued to On Time Trucking as listed certificate holder

Please List All Areas Y	our Company Se	rvices	
revious 1099 Employ	/ment		
Company Name:			Dates
Address:			From To
City:	State	Zip	
Phone Number:			Reason for leaving
Company Name:			Dates
Address:			From To
City:	State	Zip	110111
Phone Number:	State		Reason for leaving
			reason to reaving
Company Name:			Dates
Address:			From To
City:	State	Zip	
Phone Number:			Reason for leaving
Company Name:			Dates
Address:			From To
City:	State	Zip	
Phone Number:			Reason for leaving

## **Contact Information**

Please fill out the following form so we can update personal information Date \_\_\_\_\_ Name: Cell Phone# Home Phone# **Current Address** Emergency Contact \_\_\_\_\_ Phone# Once completed, please return this form to our office Thank you.

Please complete all information. When returning this application please provide info requested above and include the following:

- Copy of your Driver's License
- Copy of your social security card or IRS form listing EIN# & company name
- Completed attached W-9 form
- All insurance requirements listed on the first page of this application

(Rev. December 2014) Department of the Treasury Internal Revenue Service

## **Request for Taxpayer Identification Number and Certification**

Give Form to the requester. Do not send to the IRS.

	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.						
Je 2.	2 Business name/disregarded entity name, if different from above	usiness name/disregarded entity name, if different from above					
Print or type See Specific Instructions on page	3 Check appropriate box for federal tax classification; check only one of the following seven boxes:  Individual/sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estatingle-member LLC  Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ►  Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above the tax classification of the single-member owner.  Other (see instructions) ►			4 Exemptions (codes apply only to certain entitles, not individuals; see instructions on page 3):  Exempt payee code (if any)  Exemption from FATCA reporting code (if any)  (Applies to accounts mainteined outside the U.S.)			
	5 Address (number, street, and apt. or suite no.)	R	Requester's name and address (optional)				
	6 City, state, and ZIP code						
•,	7 List account number(s) here (optional)						
Pa	Taxpayer Identification Number (TIN)						
			.				
Enter your TIN in the appropriate box. The TIN provided must match the name given of backup withholding. For individuals, this is generally your social security number (SSN resident allen, sole proprietor, or disregarded entity, see the Part I instructions on page entities, it is your employer identification number (EIN). If you do not have a number, s TIN on page 3.		number (SSN). However, for tions on page 3. For other	or				
	. If the account is in more than one name, see the Instructions for linelines on whose number to enter.	e 1 and the chart on page 4	for Employer	Identification number			
guide	sines of whose number to enter.			-			
Par	The state of the s						
Unde	or penalties of perjury, I certify that:						
1. Th	ne number shown on this form is my correct taxpayer identification n	umber (or I am waiting for a	number to be is	sued to me); and			
Se	am not subject to backup withholding because: (a) I am exempt from ervice (IRS) that I am subject to backup withholding as a result of a fa o longer subject to backup withholding; and						
	ım a U.S. citizen or other U.S. person (defined below); and						
4. Th	e FATCA code(s) entered on this form (if any) indicating that I am exe	empt from FATCA reporting I	s correct.				
becar intere gener	fication instructions. You must cross out item 2 above if you have luse you have falled to report all interest and dividends on your tax rest paid, acquisition or abandonment of secured property, cancellationally, payments other than interest and dividends, you are not required to page 3.	eturn. For real estate transact on of debt, contributions to a	ions, item 2 doe in individual reti	es not apply. For mortgage rement arrangement (IRA), and			
Sigr Here		Date	<b>&gt;</b>				
		Form 1098 (home mortgi (tuition)	• Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T				
Section references are to the Internal Revenue Code unless otherwise noted.		• •	• Form 1099-C (canceled debt)				
Future developments. Information about developments affecting Form W-9 (such		·	Form 1099-A (acquisition or abandonment of secured property)				
as legislation enacted after we release it) is at www.lrs.gov/fw9.  Purpose of Form		Use Form W-9 only if yo provide your correct TIN.	Use Form W-9 only if you are a U.S. person (including a resident allen), to				
An inc	lividual or entity (Form W-9 requester) who is required to file an information	If you do not return Form	n W-9 to the reque	ester with a TIN, you might be subject			
return with the IRS must obtain your correct taxpayer identification number (TIN)			to backup withholding. See What is backup withholding? on page 2.  By signing the filled-out form, you:				

which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of Income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),  $\,$
- 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- 4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See What is FATCA reporting? on page 2 for further information.