



**FAIR CREDIT REPORTING ACT DISCLOSURE
ACKNOWLEDGEMENT AND AUTHORIZATION
TO OBTAIN REPORTS**

By this document, Savanna Energy Services (USA) Corp. discloses that a motor vehicle, criminal history, credit, and/or employment verification report may be obtained for employment purposes as part of the pre-employment background investigation, or at any time during employment. This disclosure is required by the Fair Credit Reporting Act (FCRA), as amended, 15 U.S.C. §§ 1681 et. seq.

I acknowledge receipt of a clear and conspicuous disclosure provided to me under the provisions of the FCRA by Savanna Energy Services (USA) Corp.

I hereby authorize Savanna Energy Services (USA) Corp., its agents and subsidiaries to verify the information provided on my application for employment and to obtain reports and information for employment purposes.

I understand a criminal history report may include arrests and convictions, as well as plea bargains, deferred adjudications and delinquent conduct committed as a juvenile.

I understand that these reports and any information provided will be used in determining my suitability for employment at Savanna Energy Services (USA) Corp.

Before denying employment or making any other employment decisions, which adversely affect me based in whole or in part of such report, Savanna Energy Services (USA) Corp. must first provide me with a copy of the report and a summary of my rights under the FCRA.

Savanna Energy Services (USA) Corp. considers these reports to be important tools in its human resources administration, safety and security practices. My failure to authorize the company to obtain these reports or revocation of such authority may serve as grounds to revoke my driving privileges, and possibly dismiss me from employment.

I agree to hold harmless Savanna Energy Services (USA) Corp. and its subsidiaries, agents, employees, employment contractors, owners, officers and directors from and against any contract or negligence claims, damages, losses and expenses, including attorney's fees, arising out of or by reason of complying with this request. A photo or faxed copy of this signed consent form will be considered valid as an original.

This is a continuing authorization, which shall remain in effect as long as I remain an employee of Savanna Energy Services (USA) Corp. or its subsidiaries.

I acknowledge receipt of a copy of this authorization form and agree to adhere to all these provisions for employment consideration at Savanna Energy Services (USA) Corp. and its subsidiaries.

Candidate/Employee Signature

Date

Candidate/Employee Printed Name

Date of Birth

Candidate/Employee Aliases or Maiden Name

Social Security Number



Annual Review of Driving Record

Motor Carrier Instructions: Each motor carrier shall at least once every 12 months, require each driver to prepare and furnish it with a list of all violations of motor vehicle traffic laws and ordinances (other than parking) of which the driver has been convicted, or on account of which he/she has forfeited bond or collateral during the preceding 12 months (§391.27). Drivers who have provided information required by §383.31 need not repeat that information on this form.

Driver Requirements: Each driver shall furnish the list as required by the motor carrier above. If the driver has not been convicted of, or forfeited bond or collateral on account of any violation which must be listed, he/she shall so certify (§391.27).

| Completed by Driver – Certification of Violations | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|---------------------------|--|------------------------|--|
| Driver's Printed Name | | | | | |
| Social Security Number | | Hire Date | | | |
| DL Number | | State | | Exp Date | |
| I certify that the following is a true and complete list of traffic violations required to be listed for which I have been convicted or forfeited bond or collateral during the past 12 months. | | | | | |
| If you have had NO violations, please indicate by writing NONE → | | | | | |
| Date | Offense | Location | | Type of Vehicle | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Date of Certification | | Driver's Signature | | | |

| Completed by Motor Carrier – Annual Review of Driving Record | | | |
|----------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|--------------|--|
| I have hereby reviewed the driving record of the above named driver in accordance with §391.25 and find that he/she (check one): | | | |
| <input type="checkbox"/> | Meets minimum requirements of safe driving. | | |
| <input type="checkbox"/> | Does not adequately meet satisfactory safe driving performance. | | |
| <input type="checkbox"/> | Is disqualified to drive a motor vehicle pursuant to §391.15. | | |
| Action Taken With Driver | | | |
| Reviewed By (Print) | | Date | |
| Signature | | Title | |



REXUS CORPORATION

STARTING THE BACKGROUND SCREENING PROCESS

Rexus Corporation's national headquarters is in Charlotte, North Carolina. To ensure best results, the client shares information with Rexus following the procedure below:

- We recommend that you contact Rexus before beginning to discuss which background investigations are best for your company.
- To start the process, **fax or e-mail:**
 - **Job application**
 - **Resume (if available)**
 - ***Signed Disclosure and Release form***
 - **Work Request form**

to Rexus at **888.899.0394** or to [**billy.ensley@rexus.com**](mailto:billy.ensley@rexus.com).

Online services for submission are also available.

- When Rexus completes the work, we will return a report to you as soon as possible by e-mail, fax, or regular mail, based on your preference. We encrypt all incoming and outgoing information and send documents in PDF format. You can also retrieve reports online via secure portal access.
- Rexus needs **your contact person's telephone number, fax number, and e-mail address** so that we know where to direct information. We recommend e-mail when possible.
- Are there any **special instructions?** For example, does Rexus need to call the contact person before sending reports, or can we send reports when complete?
- If you have applications which will be sent from multiple locations, please let us know so that Rexus can inform your key people with details of the process.

For any questions concerning start-up procedures, please contact Billy Ensley, Chief Operating Officer, at 800.588.4119 or [billy.ensley@rexus.com**](mailto:billy.ensley@rexus.com).**



REXUS CORPORATION

BACKGROUND SCREENING WORK REQUEST

Client: Name: Savanna Well Servicing Site: Dickinson, ND

Contact: Coley Hueske

Phone Number: 701-483-5488

Fax Number: 701-483-5490

E-mail Address: nhueske@savannaenergy.com

Applicant Name: _____

Position Applied For: _____ Location/Code: _____

Search items requested for this applicant:

- National Bankruptcy Search
- Business References
- Civil Records
- Education Verification
- Employment Verification
- Federal Criminal Records—Circle: **National** or **One district**
- Motor Vehicle Records
- Municipal (County) Criminal Records—Felonies and Misdemeanors
- Social Security Number Verification
- Personal Credit Report
- Personal References
- Professional Licenses and Certifications Verification
- Statewide Repository Criminal Records—Felonies and Misdemeanors
- Sexual Predators Registry
- 10-Panel Drug Screening
- Office of Foreign Assets Control—OFAC (National Terrorists Watch Lists Search)—**Free to all clients**

➤ **Please e-mail or fax this request to 888.899.0394 or call 800.588.4119.**

DISCLOSURE AND RELEASE

In connection with my application for employment with **Savanna Energy Services**, I understand that a background report may be requested at will by **Savanna Energy Services**. This report may include such information as: education, former employment, driving record, credit, bankruptcy proceedings, criminal records, etc., from federal, state, and other agencies which maintain such records.

As set forth in the Fair Credit Reporting Act, I have the right to request from **Savanna Energy Services**, and the report provider, upon proper identification, the nature and substance of the information obtained from the background report.

I authorize any party or agency contacted by **Savanna Energy Services** or its authorized representatives, to furnish the above-described information. I hereby authorize procurement of the background report.

Applicant Signature

Date

Name (Please Print)

Applicant: Please complete the following for proper identification purposes.

Name:

Last

First

Middle

Maiden

Social Security Number

Date of Birth

List all other last names or maiden names used

CONTINUED ON NEXT PAGE

(CONTINUED)

Applicant Name: _____

List ALL addresses for past 10 years:

Current Address: City County State Zip How Long?

Previous Address: City County State Zip How Long?

Previous Address: City County State Zip How Long?

Previous Address: City County State Zip How Long?

Previous Address: City County State Zip How Long?

Previous Address: City County State Zip How Long?

Driver's License Number and State

List any other names or Social Security Numbers you have used.

List any criminal convictions. Provide the date(s), county/parish, and state.

Company Name _____

FAIR CREDIT REPORTING ACT DISCLOSURE STATEMENT

In accordance with the provisions of Section 604(b)(2)(A) of the Fair Credit Reporting Act, Public Law 91-508, as amended by the Consumer Credit Reporting Act of 1996 (Title II, Subtitle D, Chapter I, of Public Law 104-208), you are being informed that reports verifying your previous employment, previous drug and alcohol test results, and your driving record may be obtained on you for employment purposes. These reports are required by Sections 382.413, 391.23, and 391.25 of the Federal Motor Carrier Safety Regulations.

Applicant's signature

Date

Print name

Social Security number



Pre-Employment Drug Testing Policy

Federal law requires applicants to indicate whether they have previously refused to be tested or received a positive test result on any pre-employment for any other DOT employer. Please provide this information below. It is a federal offense to falsify this information.

- I have **NOT** tested positive on a pre-employment drug test for any other **DOT** employer in the past **TWO** years, nor have I refused to be tested.
- Yes**, I have tested positive (or refused to be tested) on a pre-employment drug test for another **DOT** employer in the past **TWO** years. (If yes, please sign below, and do not continue.)

Print Name

Driver's Signature

Date

Each applicant for a DOT-covered position at Savanna Well Servicing, after being notified that he/she will be offered a job, must be drug tested, in accordance with federal regulations 49 CFR Part 382. If the test result is positive, or if the applicant refuses to submit to a pre-employment test, the job offer will be withdrawn.

We must have a negative test result in our file before we can request or allow an employee to perform duties within any of our safety-sensitive positions.

A positive dilute drug test will be considered to be a positive test. A negative dilute drug test (or invalid specimen) will result in the employee being required to immediately take another test, with minimum notice.

Every applicant who provides a positive test result will have an opportunity to speak with a Medical Review Officer about any recent use of prescription and non-prescription drugs that might explain the positive test result.

The cost of the initial screening test and the confirmatory test will be paid by Savanna Well Servicing. Every applicant whose test result is positive may, within 72 hours, request a re-test at his/her own expense. The re-test will be conducted on the same sample as was provided for the initial test and must be conducted by a different certified testing laboratory.

My signature below means that I have read this information, that I have had an opportunity to review a copy of the Savanna Well Servicing drug and alcohol policy, and that if I am offered a position, I consent to being tested for drugs as a condition of employment.

Print Name

Driver's Signature

Date

(Original to be kept in Driver Qualification File)