

Hello and Thank You for requesting our company packet

Please fill out the packet as much as possible this will insure we have the most complete database in the industry.

If you have multiple cars please fill out a driver sheet for each driver and provide photos for each vehicle in your fleet

We do have direct deposit options

A: 3-4 business day deposit = free

B: next business day deposit = \$15.00\*

\*next business day deposits need to be done before 2:00 pm central time zone. The deposits are only available once we are paid by the customer or If we have the funds available.

If you have any questions please give us a call at 651-395-8801

Or by email @ [jesse.hop@att.net](mailto:jesse.hop@att.net)

**CHECK US OUT AT**  
**[WWW.GOTPILOTcars.COM](http://WWW.GOTPILOTcars.COM)**



# ROCKIN' IT PILOT CARS CONTRACTOR SIGN UP PACKET

**NAME OF COMPANY**

**CONTACT INFORMATION**

Company Name

FIRST NAME

LAST NAME

STREET ADDRESS

STREET ADDRESS LINE 2

CITY

STATE

ZIP CODE

PHONE NUMBER

EMAIL ADDRESS

FAX NUMBER

**CHECK ALL THAT APPLY TO YOU**

HIGH POLE

CHASE

LEAD

ROUTE SURVEY

STEERMAN

TWIC CARD

PASSPORT

CDL

AREAS OF SERVICE

Please list your type of insurances and states certified in

how many drivers in your company

how many years in business for you and your drivers

PLEASE SEND ALL DRIVERS INFORMATION TO 866-899-6638

WE NEED COPIES OF ALL DRIVERS LICENSES, DRIVERS CERTS, 2 PICTURES OF EACH VEHICLE, COPIES OF INSURANCE ACCORD LETTER, A COMPLETED W-9, AND TWIC CARD

WE NEED TO BE LISTED AS ADDITION INSURED ON YOUR INSURANCE PLEASE HAVE INSURANCE FAX IT TO 866-899-6638

#### CHECK LIST

DRIVERS LICENSE

DRIVERS CERTS

PICTURES 2 PER CAR

COPIES OF INSURANCE

W-9

TWIC CARD

PASSPORT

UPDATED VEHICLE REGISTRATION CARD

Other

PLEASE DO NOT CARD OR CONTACT OUR CUSTOMERS TO GO AROUND US. IF WE HEAR THAT YOU CARDED OR CALLED OUR CUSTOMERS WE WILL STOP USING YOUR SERVICE AND ADD YOU TO OUR DO NOT CALL LIST AND WE WILL NOTIFY OTHERS OF YOUR BUSINESS ETHICS

THANK YOU

# WWW.GOTPILOTcars.COM

PILOT CAR DRIVERS INFORMATION

PILOT CAR DRIVERS NAME

PILOT CAR DRIVERS PHONE NUMBER

DRIVERS LICENCE NUMBER

STATE

EXPIRES

ADDRESS

STATE CERTS

YEARS OF EXPERIANCE

HOW MANY YEARS OF HIGH POLE? IF ANY

HOW MANY YEARS AS A STEERMAN? IF ANY

IF YOU HAVE MORE THAN ONE DRIVER PLEASE REPRINT THIS PAGE AND FILL OUT FOR EACH DRIVER

# Request for Taxpayer Identification Number and Certification

**Give form to the  
requester. Do not  
send to the IRS.**

Print or type  
See Specific Instructions on page 2.

|   |  |  |
|---|--|--|
| Name  |  |  |
| Business name, if different from above  |  |  |
| Check appropriate box: <input type="checkbox"/> Individual/<br>Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other ▶ ..... | <input type="checkbox"/> Exempt from backup<br>withholding |  |
| Address (number, street, and apt. or suite no.)   | Requester's name and address (optional)                    |  |
| City, state, and ZIP code   |  |  |
| List account number(s) here (optional)  |  |  |

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. For individuals, this is your social security number (SSN). **However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3.** For other entities, it is your employer identification number (EIN). If you do not have a number, see **How to get a TIN** on page 3.

|                        |  |  |  |  |  |  |  |  |
|------------------------|--|--|--|--|--|--|--|--|
| Social security number |  |  |  |  |  |  |  |  |
|                        |  |  |  |  |  |  |  |  |

or

|                                |  |  |  |  |  |  |  |  |
|--------------------------------|--|--|--|--|--|--|--|--|
| Employer identification number |  |  |  |  |  |  |  |  |
|                                |  |  |  |  |  |  |  |  |

**Note:** If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

## Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), **and**
2. I am not subject to backup withholding because: **(a)** I am exempt from backup withholding, or **(b)** I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or **(c)** the IRS has notified me that I am no longer subject to backup withholding, **and**
3. I am a U.S. person (including a U.S. resident alien).

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

**Sign Here**

Signature of  
U.S. person ▶

Date ▶

## Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

**U.S. person.** Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

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.

**Note:** If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Foreign person.** If you are a foreign person, use the appropriate Form W-8 (see **Pub. 515**, Withholding of Tax on Nonresident Aliens and Foreign Entities).

## Nonresident alien who becomes a resident alien.

Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the recipient has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

# Rockin' It Pilot Cars Hold Harmless Agreement

## **PILOT CAR/ ESCORT VEHICLE- MOTOR CARRIER AGREEMENT**

Whereas, **Rockin' It Pilot Cars** ("CARRIER") with offices at 880 EAST 6TH STREET NEW RICHMOND, WI 54017

Agreement, the parties agree as follows:

1. ESCORT is an independent contractor with exclusive control and direction of the persons operating its vehicles or otherwise engaged in providing the pilot car services. ESCORT assumes full responsibility for the payment of all local, state and federal payroll and/or withholding taxes; contributions or taxes for unemployment insurance, old age pensions, Social Security, workers compensation, and other social security related protection; and all other costs related to the employment of persons engaged in the performance of pilot car services. ESCORT is not authorized to bind CARRIER with respect to agreements with third parties.
2. ESCORT agrees that it shall obtain and keep in force all necessary authorities and certifications for each state in which it provides pilot car services for CARRIER.
3. ESCORT agrees to maintain at all times while this Agreement is in effect, commercial auto liability insurance coverage with limits not less than \$1,000,000.00. ESCORT will provide to CARRIER a certificate of insurance evidencing such coverage, and naming "Rockin It Pilot cars" as additional insured.
4. The obligation of ESCORT to provide the pilot car services is exclusive to ESCORT. ESCORT may not subcontract this service to another escort to provide the pilot car service without the express written consent of CARRIER. If ESCORT hires another escort to provide a substituted service without this express written permission, it is agreed that ESCORT will remain responsible for the service as if it had performed the service directly.
5. The compensation which shall be paid by CARRIER to ESCORT will be agreed upon by the parties prior to the performance of any service by ESCORT. Any published tariff rates ESCORT may have shall not apply to any services provided to CARRIER.
6. By virtue of this signed Agreement, ESCORT agrees to allow CARRIER to obtain an MVR for ESCORT's drivers. If ESCORT is using drivers other than the signatory below, ESCORT acknowledges having received written approval from driver(s) allowing ESCORT and/or CARRIER to obtain MVR(s).

7. Prior to payment of invoices from ESCORT, CARRIER must have on file from ESCORT the following documents: this signed Agreement; the insurance certificate referenced herein; and a signed W-9 form. Except as otherwise provided, CARRIER shall pay ESCORT's invoices within thirty (30) days of receipt of invoice and any other documentation as may be required by CARRIER. ESCORT'S invoices shall reference CARRIER's load number to assure prompt payment.

8. ESCORT agrees to indemnify, defend and save harmless CARRIER and its agents, servants, and employees against all claims, liabilities, losses, damages, cost or expenses (including reasonable attorney's fees and expenses) arising in connection with any lawsuit, regulatory action, liability, obligation, demand or claim, or any injury to or death of person(s), or damage to or loss of property and resulting from any act and/or omission of ESCORT and/or it's agents, servants and employees arising under this Agreement or resulting from ESCORT'S failure to comply with the provisions of this Agreement. Nothing shall require the ESCORT to indemnify, defend, or save harmless CARRIER for the portion of any such claims, liabilities, losses, damages, costs or expensed that are attributable to the sole negligence or omission of CARRIER.

9. This Agreement will not be modified except by a written agreement signed by both parties. This Agreement will continue in effect until terminated by either party on thirty (30) days prior written notice.

10. This Agreement will be construed in accordance with the laws of the State of Wisconsin. ESCORT acknowledges that it will be subject to the jurisdiction of the federal and state courts in Wisconsin without giving effect to the principles of conflict of laws.

**IN WITNESS WHEREOF, the parties hereto enter into this Agreement on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_, which shall be the effective date.**

**Rockin' It Pilot Cars (CARRIER)**

**By: \_\_\_\_\_ Date \_\_\_\_\_**  
**Authorized Signature**

\_\_\_\_\_**(ESCORT, print name)**

\_\_\_\_\_**Date \_\_\_\_\_**  
**Authorized Signature**

