COMMERCIAL DRIVER EMPLOYMENT HISTORY

Please complete the following or forward a copy of the D.O.T	. Driver Employment Record.
Insured <u>CANNON TRUCK CINGS</u>	Name of Driver <u>HAROGO KUMAR</u>
Policy No.	Driver's Date of Birth
	Driver's License Number <u>V9923152</u>
(Including Current Employer, list in order of most recent emp	loyer first. MUST HAVE FULL THREE YEARS.)
Employer CANNON TRUCK LIN	E Phone 209 507 6456
Address 2572 PLUM BRANCH	PL MANTECA CA 95336
	Bus (# of passengers) % □ Other %
Date of Employment: From (MO/YR) $3-15-2$	093 TO (MONR) CUSSENT
Radius of Use: $\square 0 - 75$ Miles $\square 76 - 30$	00 Miles
Employer SUKH LCKH JOSH 13	OPK/Phone 739 - 320-3601
	MERCED CA
Amount of Experience	☐ Tractor/Semi Trailer % ☐ Dump Truck %
Date of Employment: From (MO/YR) $3-1-209$	14 TO (MONR) 3-12-2023
Radius of Use: $\Box 0 - 75$ Miles $\Box 76 - 30$	00 Miles 🖾 Over 300 Miles
Employer	Phone
Address	
Amount of Experience	☐ Tractor/Semi Trailer % ☐ Dump Truck % Bus (# of passengers) % ☐ Other %
Date of Employment: From (MO/YR)	To (MO/YR)
Radius of Use: □ 0 − 75 Miles □ 76 − 36	00 Miles
Have you had any accidents in the last 3 years? ☐ Yes	□ No If yes, please describe.
During the past three years have you had at least two years that which you will be operating for this employer? The undersigned applicant represents that the information pr by applying for insurance, I authorize Northland Insurance to	rovided herein is true and correct. I further understand that
Hord	ED Kuman 3-13-25

Signature of the Named Insured or Driver

Date

COMMERCIAL DRIVER EMPLOYMENT HISTORY

Date

Please complete the following or forward a copy of the D.O.T.	Priver Employment Record.	
Insured CAMBON TRUCK CINGS	Name of Driver <u>PASIV</u> KUMAR	
Policy No.	Driver's Date of Birth 2/5/1985	
· ·	Driver's License Number <u> </u>	
(Including Current Employer, list in order of most recent employer first. MUST HAVE FULL THREE YEARS.)		
Employer CANNON TRUCK LING INC	Phone 209 507 6436	
Address 2572 PLUM BRANCH PL	MANTECA CA 95336	
Amount of Experience Straight Truck% Driving Vehicle Types Listed: Limousine% Bu Date of Employment: From (MO/YR)9 \2023	s (# of passengers) %	
Radius of Use: □ 0 – 75 Miles □ 76 – 300		
Employer KS. GHUMAN TRUCKING	WC Phone 209. 206 8551	
Address 45 SILVER HORN DY		
Amount of Experience Straight Truck — % Driving Vehicle Types Listed: Limousine — % But Date of Employment: From (MO/YR) 1/2023 Radius of Use: 0 - 75 Miles 0 76 - 300	TO (MONR) 8/2023	
Employer SLJ BOFYOI INC		
Address 603 Chandow Or Amount of Experience Straight Truck — % But Date of Employment: From (MONR) 3 22 Radius of Use: 0 0 - 75 Miles 0 76 - 300	Tractor/Semi Trailer / (/) %	
Have you had any accidents in the last 3 years? ☐ Yes ☐		
During the past three years have you had at least two years over-the-road driving experience with equipment similar to that which you will be operating for this employer?		
The undersigned applicant represents that the information proving by applying for insurance, I authorize Northland Insurance to verify applying for insurance to verify applying for insurance.		

Signature of the Named Insured or Driver