

EMPLOYEE DRIVING RECORD AUTHORIZATION

It is the policy of **REYNOLDS ASPHALT & CONSTRUCTION COMPANY** to check the driving record of employees who may operate a company motor vehicle. You are being asked to consent to a motor vehicle record check and periodic checks in the future. By signing the following statement you are giving your consent to the periodic checks.

I do hereby appoint and/or assign **REYNOLDS ASPHALT & CONSTRUCTION COMPANY** to conduct or commission periodic checks of my driving record. I agree to indemnify and release **REYNOLDS ASPHALT & CONSTRUCTION COMPANY** and its agents from any and all liability for claims, damages, losses or actions resulting from or arising from its investigation, except as such may be caused by or arise out of the gross negligence or unauthorized act of either party. I understand that an adverse driving record may be grounds for reassignment or termination of employment.

I have read the above statement and accept the same as a condition of my employment with **REYNOLDS ASPHALT & CONSTRUCTION COMPANY**.

Texas Driver's License #	Date of Birth (Month/Day/Year)
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Signature	Date
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Printed Name

Witness