

LEGACY ROUTE TRANSPORT
Independent Contractor Driver Application
(Box Truck & Cargo Van Operators)

SECTION 1: APPLICANT INFORMATION

Full Legal Name: _____

Date of Birth: ____ / ____ / ____

Phone Number: _____

Email Address: _____

Current Address: _____

City: _____ State: _____ Zip: _____

How long at this address? _____

Previous Address(s) (if less than 5 years):

SECTION 2: BUSINESS STATUS

Applying as:

Independent Contractor (Individual)

LLC / Corporation

Business Name: _____

EIN / SSN: _____

Years in Operation: _____

SECTION 3: DRIVER LICENSE INFORMATION

Driver's License Number: _____

State Issued: _____

Expiration Date: ____ / ____ / ____

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License Class:

Standard License

CDL

License ever suspended or revoked?

Yes No

If yes, explain:

SECTION 4: DRIVING EXPERIENCE

Years of Commercial Driving Experience: _____

Vehicle Types:

Cargo Van

Sprinter Van

Box Truck (12ft–26ft)

Other: _____

Operated under DOT authority?

Yes No

Accidents (last 3 years):

None Yes

Explain:

Traffic Violations (last 3 years):

None Yes

Explain:

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SECTION 5: VEHICLE INFORMATION

Ownership:
 Own Lease

Vehicle Type: _____

Year: _____ Make: _____ Model: _____

Cargo Dimensions: _____

Registration Current?
 Yes No

SECTION 6: INSURANCE INFORMATION

Insurance Company: _____

Policy Number: _____

Coverage Type: _____

Liability Coverage Amount: _____

Expiration Date: ____ / ____ / ____

IMPORTANT:

- Contractors must provide their own commercial insurance.
- Drivers with exceptional records may be considered for company coverage.

SECTION 7: BACKGROUND & COMPLIANCE

- I agree to a background check
 I agree to a drug test
 I will provide my Motor Vehicle Record (MVR)

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SECTION 8: AVAILABILITY

Preferred Work Type:

Local Regional OTR

Start Date: ____ / ____ / _____

Available Days:

Mon Tue Wed Thu Fri Sat Sun

SECTION 9: EQUIPMENT

Do you have experience using the following equipment?

- Pallet Jack
- Hand Truck / Dolly
- Straps
- Liftgate
- E-Track

Do you currently have access to any of this equipment?

- Pallet Jack
- Hand Truck / Dolly
- Straps
- Liftgate
- E-Track

Can you lift?

- Up to 50 lbs
 - Up to 100 lbs
-

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SECTION 10: REFERENCES

Reference 1:

Name: _____

Company: _____

Phone: _____

Reference 2:

Name: _____

Company: _____

Phone: _____

SECTION 11: ADDITIONAL COMMENTS

SECTION 12: AGREEMENT

I certify all information is true and understand:

- I am an independent contractor, not an employee**
- I must provide my own vehicle and insurance**
- Approval requires background check, drug test, and MVR**

Signature: _____

Date: ____ / ____ / ____