



## TO ALL APPLICANTS,

Please remove this letter from the application and take it with you. It is yours to keep and refer to.

Thank you for applying to Tapani Underground, Inc. We are happy you have chosen us as your prospective employer; you have made an excellent choice. As an applicant, it is natural for you to have a number of questions concerning the careers available, pay, benefits and what we expect from you as an applicant as well as, what you may expect from Tapani Underground, Inc.. You will hopefully find the answers to most of your questions in this letter. This letter explains our procedures for the initial application process.

### CAREERS AVAILABLE AT TAPANI UNDERGROUND, INC.

Tapani Underground, Inc. has numerous positions on staff such as Laborers, Equipment Operators, Concrete Laborers, Concrete Carpenters, Flagger, Mechanics, Fuelers, Office and Management Staff who keep our projects running smoothly. The benefits are excellent, and the rate of pay is determined by industry standards, experience and education levels.

### OUR APPLICATION PROCESS – WHAT YOU CAN EXPECT FROM US

1. To be treated fairly, with professionalism and respect. Tapani Underground, Inc. is an equal opportunity employer.
2. Equal access to programs, services and employment. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a Human Resources Representative.
3. We **receive** all applications, but we do not **accept** incomplete applications, or applications that are unreadable. So please print or type neatly on the application form.
4. We review all received applications soon after they are submitted. During this review we accept or reject applications for the position applied for based on completeness and listed experience. Applications that are incomplete or unreadable will not be further considered, nor will the applicant be contacted.
5. We will contact applicants whose applications were accepted for initial testing and interviews, and the applicant can expect several weeks notice in most cases.

### STARTING TOWARDS A NEW CAREER – WHAT WE EXPECT FROM YOU

The first step is to fully complete your application for employment. We do not accept resumes' alone, but they may be attached to your application. If your application is accepted, **you will be contacted** by phone or mail for your initial testing and interview. **Please do not** call us. **We will contact** all applicants whose applications were accepted.

The initial testing / interview process is usually held at our main facility. If you are selected for this process, you will typically test / interview with numerous other applicants. Interviews are conducted by Tapani Underground, Inc. Human Resources staff or other employees selected for the task. Successful applicants should expect their references to be contacted and may be invited for a secondary interview when a position becomes available. The secondary interview may result in a conditional offer of hire and pre-employment screenings for selected candidates.

Pre-Employment drug testing is required for all positions. Employment will require transfer to different work locations based on the location of our projects and employee assignment. This may include overtime, night, weekend and/or holiday hours. In accordance with Federal law, proof of identity and proof of authorization to work in the United States is required upon employment.

Our application process is lengthy and intensive for a reason; we intend to hire the best qualified applicants who share a desire for successful and rewarding careers at Tapani Underground, Inc..

### A NOTE FOR LABORERS AND OPERATORS

Tapani Underground, Inc. is a proud member and training agent for the Joint Apprenticeship Training Council and the Northwest College of Construction. Tapani Underground, Inc. employs several apprentices, and has found it to be a valuable program for the apprentice and our company. For information about the Apprenticeship Program please call the Northwest College of Construction at 1-800-309-1442. [www.nwcc.com](http://www.nwcc.com).

Kevin Tapani, President – Tapani Underground, Inc.



Tapani Underground, Inc..  
 PO Box 1900 – 1904 SE 6<sup>th</sup> Place  
 Battle Ground, WA 98604  
 (360) 687-1148 – Office  
 (360) 687-7968 – Fax  
[www.tapaniunderground.com](http://www.tapaniunderground.com)  
 AN EQUAL OPPORTUNITY EMPLOYER

## EMPLOYMENT APPLICATION

**IMPORTANT, PLEASE READ THESE INSTRUCTION PRIOR TO COMPLETING YOUR APPLICATION:** This application must be **FULLY COMPLETED** for consideration. Do not leave any question or information block unanswered. If you do not know an answer to a question, write UNKNOWN in the block. If a question does not apply to you, place an N/A in the answer block or set of blocks. You may attach a resume to this application, but resumes alone will not be considered for employment. **DO NOT MARK THE APPLICATION “SEE RESUME”.**

### SECTION 1) APPLICANT INFORMATION:

<b>Position Applied for: Please mark all that apply</b> <input type="checkbox"/> Laborer <input type="checkbox"/> Heavy Equipment Operator <input type="checkbox"/> Pipe layer <input type="checkbox"/> Traffic Control <input type="checkbox"/> Mechanic <input type="checkbox"/> Fueler <input type="checkbox"/> Administrative/Office <input type="checkbox"/> Supervisory/Management <input type="checkbox"/> Concrete <input type="checkbox"/> Truck Driver		<b>Application Date:</b> _____
<b>Date Available for Work:</b> _____	<b>Type of Employment Desired:</b> <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary: Date from _____ to _____ <input type="checkbox"/> Educational Co-Op	

<b>Last Name:</b>	<b>First Name</b>	<b>Middle Initial</b>
<b>Home Address:</b>		
<b>City:</b>	<b>State:</b>	<b>Zip Code:</b>
<b>Mailing Address: (if different)</b>		
<b>City:</b>	<b>State:</b>	<b>Zip Code:</b>
<b>Home Phone:</b>	<b>Cell Phone:</b>	<b>Message Phone:</b>

1. Are you under 18? Yes  No 
  - 1) If yes, can you furnish a work permit? Yes  No  N/A
2. Are you now or have you previously been employed by Tapani Underground, Inc.? Yes  No   
 If yes, give position and dates: \_\_\_\_\_
3. If asked, can you provide proof of eligibility to work in the United States? Yes  No
4. Are you able to meet attendance requirements which may include overtime, week-ends and nights? Yes  No
5. Have you been convicted of a crime or served time in jail/prison in the last seven (7) years? Yes  No   
 If yes, please attach an additional page with explanation.

*Note: A conviction will not necessarily be a bar to employment. Each instance and explanation will be considered in relation to the position for which you are applying.*

## SECTION 2) EMPLOYMENT HISTORY:

- 1. Have you ever been terminated or asked to resign from any job?** Yes  No   
If Yes, please explain the circumstances on a separate sheet and attach it to this application.
- 2. Starting with your present employer, please account for your past work experience for the last 10 years.** If applicable, please explain fully any gaps in your employment history in the sections provided. You may attach any supplemental information you think might be useful. However, be sure to fill out this section completely. You are responsible for ensuring that the information requested is accurate and complete.

Job Title:		Start Date:	End Date:
Employer Name:		Phone:	
Employer Address:			
Supervisor Name, Title and contact phone number:			
Co-worker Name, Title and contact phone number:			
Co-worker Name, Title and contact phone number:			
Starting Hourly Rate/Salary:	Ending Hourly Rate/Salary:	May we contact this employer? Yes <input type="checkbox"/> No <input type="checkbox"/> If no, please explain on a separate sheet.	
Reason for leaving:			
Nature of Work Performed and Job Responsibilities:			

Please explain any gap in employment history here, ONLY if gap <b>doesn't</b> have to do with a disability. List reason below (ie: travel, school, etc.) If you need additional space, please attach a separate sheet to your application	From Date	To Date

Job Title:		Start Date:	End Date:
Employer Name:		Phone:	
Employer Address:			
Supervisor Name, Title and contact phone number:			
Co-worker Name, Title and contact phone number:			
Co-worker Name, Title and contact phone number:			
Starting Hourly Rate/Salary:	Ending Hourly Rate/Salary:	May we contact this employer? Yes <input type="checkbox"/> No <input type="checkbox"/> If no, please explain on a separate sheet.	
Reason for leaving:			
Nature of Work Performed and Job Responsibilities:			

## SECTION 2) EMPLOYMENT HISTORY (continued)

Please explain any gap in employment history here, ONLY if gap <b>doesn't</b> have to do with a disability. List reason below (ie: travel, school, etc.) If you need additional space, please attach a separate sheet to your application	From Date	To Date

Job Title:	Start Date:	End Date:
Employer Name:	Phone:	
Employer Address:		
Supervisor Name, Title and contact phone number:		
Co-worker Name, Title and contact phone number:		
Co-worker Name, Title and contact phone number:		
Starting Hourly Rate/Salary:	Ending Hourly Rate/Salary:	May we contact this employer? <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> If no, please explain on a separate sheet.
Reason for leaving:		
Nature of Work Performed and Job Responsibilities:		

Please explain any gap in employment history here, ONLY if gap <b>doesn't</b> have to do with a disability. List reason below (ie: travel, school, etc.) If you need additional space, please attach a separate sheet to your application	From Date	To Date

Job Title:	Start Date:	End Date:
Employer Name:	Phone:	
Employer Address:		
Supervisor Name, Title and contact phone number:		
Co-worker Name, Title and contact phone number:		
Co-worker Name, Title and contact phone number:		
Starting Hourly Rate/Salary:	Ending Hourly Rate/Salary:	May we contact this employer? <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> If no, please explain on a separate sheet.
Reason for leaving:		
Nature of Work Performed and Job Responsibilities:		

**SECTION 2) EMPLOYMENT HISTORY (continued):**

Please explain any gap in employment history here, ONLY if gap <b>doesn't</b> have to do with a disability. List reason below (ie: travel, school, etc.) If you need additional space, please attach a separate sheet to your application	From Date	To Date

Job Title:		Start Date:	End Date:
Employer Name:		Phone:	
Employer Address:			
Supervisor Name, Title and contact phone number:			
Co-worker Name, Title and contact phone number:			
Co-worker Name, Title and contact phone number:			
Starting Hourly Rate/Salary:	Ending Hourly Rate/Salary:	May we contact this employer? Yes <input type="checkbox"/> No <input type="checkbox"/> If no, please explain on a separate sheet.	
Reason for leaving:			
Nature of Work Performed and Job Responsibilities:			

Please explain any gap in employment history here, ONLY if gap <b>doesn't</b> have to do with a disability. List reason below (ie: travel, school, etc.) If you need additional space, please attach a separate sheet to your application	From Date	To Date

Job Title:		Start Date:	End Date:
Employer Name:		Phone:	
Employer Address:			
Supervisor Name, Title and contact phone number:			
Co-worker Name, Title and contact phone number:			
Co-worker Name, Title and contact phone number:			
Starting Hourly Rate/Salary:	Ending Hourly Rate/Salary:	May we contact this employer? Yes <input type="checkbox"/> No <input type="checkbox"/> If no, please explain on a separate sheet.	
Reason for leaving:			
Nature of Work Performed and Job Responsibilities:			

**If you need additional space for employment history of the last TEN years, please attach a separate sheet using the same format. Please ensure that each of the questions asked are answered in the same order.**

**SECTION 3) EDUCATION, TRAINING, CERTIFICATES & LICENSES**

1. Do you have a high school diploma, GED or equivalent? Yes  No

List all schools attended, except elementary and middle schools (**DO NOT list from/to dates for High School**):

Name	Location	Dates Attended		Specify Degree or Certificate Earned
		From	To	
High School		X	X	

2. Do you have a valid driver's license? Yes  No   
 (Answer only if you are applying for a job that requires driving a company vehicle)

**Note: A valid driver's license is required for positions where vehicle or equipment operation is an essential job duty.**

List all valid drivers' licenses (if yes), flagger certifications or other government issued licenses you currently have.

State	License Number	Date Issued/Date of Expiration
		/
		/
		/

**SPECIAL SKILLS / QUALIFICATIONS:**

3. List any special skills or qualifications you may possess:

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**MACHINERY / EQUIPMENT OPERATING SKILLS**

4. List any specialized machinery or equipment that you can operate. Please include any certification dates of formal training received:

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# Tapani Trucking Applicants Only

## EXPERIENCE AND QUALIFICATIONS- DRIVER

**DRIVING EXPERIENCE:** Check YES or NO

Class of Equipment	Circle Type of Equipment	Dates		Approx No. of Miles (Total)
		From (m/y)	To (m/y)	
STRAIGHT TRUCK                      YES__ NO__	(VAN, TANK, FLAT, DUMP, REEFER)			
TRACTOR AND SEMI-TRAILER        YES__ NO__	(VAN, TANK, FLAT, DUMP, REEFER)			
TRACTOR- TWO TRAILERS            YES__ NO__	(VAN, TANK, FLAT, DUMP, REEFER)			
TRACTOR- THREE TRAILERS         YES__ NO__	(VAN, TANK, FLAT, DUMP, REEFER)			
TRUCK TRACTOR                      YES__ NO__				
MOTORCOACH- BUS                  YES__ NO__				
OTHER _____				

List States operated in for last five years:

\_\_\_\_\_

\_\_\_\_\_

Show Special Courses or training that will help you as a driver:

\_\_\_\_\_

\_\_\_\_\_

Which safe driving awards to you hold and from whom? \_\_\_\_\_

## ACCIDENT RECORD:

For past three years or more (Attach sheet if more space is needed), if none, write NONE

Dates	Nature of Accident (Head-on, Rear End, Upset)	License Number	Date Issued/Date of Expiration
Last Accident: _____			/
Next Previous: _____			/
Next Previous: _____			/

## TRAFFIC CONVICTIONS:

And forfeitures for the past three years (other than parking violations) If none, write NONE.

Location	Date	Charge	Penalty
			/
			/
			/

(ATTACH SHEET IF MORE SPACE IS NEEDED)

**SECTION 4) REFERENCES:**

**A.** List two (2) **PERSONAL** references who know you well enough to provide current information about yourself. DO NOT list relatives or former employers as personal references. These persons should be aware that they may be contacted by Tapani Underground, Inc. as a part of the application process. **(PLEASE COMPLETE THE ADDRESS SECTION IN FULL)**

**YOU ARE RESPONSIBLE FOR ENSURING THAT THE REFERENCE INFORMATION IS FULLY COMPLETED AND ACCURATE.**

1) NAME: \_\_\_\_\_ PHONE NO: \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

MESSAGE PHONE: \_\_\_\_\_ YEARS KNOWN: \_\_\_\_\_

2) NAME: \_\_\_\_\_ PHONE NO: \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

MESSAGE PHONE: \_\_\_\_\_ YEARS KNOWN: \_\_\_\_\_

**B.** List three (3) **BUSINESS / PROFESSIONAL** references that know you and your work style, or work habits well enough to provide current information about you. These persons should be aware that they may be contacted by Tapani Underground, Inc. as a part of the application process. **(PLEASE COMPLETE THE ADDRESS SECTION IN FULL)**

1) NAME: \_\_\_\_\_ PHONE NO: \_\_\_\_\_

**COMPANY NAME:** \_\_\_\_\_

**BUSINESS ADDRESS:** \_\_\_\_\_

TITLE: \_\_\_\_\_ YEARS KNOWN: \_\_\_\_\_

2) NAME: \_\_\_\_\_ PHONE NO: \_\_\_\_\_

**COMPANY NAME:** \_\_\_\_\_

**BUSINESS ADDRESS:** \_\_\_\_\_

TITLE: \_\_\_\_\_ YEARS KNOWN: \_\_\_\_\_

3) NAME: \_\_\_\_\_ PHONE NO: \_\_\_\_\_

**COMPANY NAME:** \_\_\_\_\_

**BUSINESS ADDRESS:** \_\_\_\_\_

TITLE: \_\_\_\_\_ YEARS KNOWN: \_\_\_\_\_



**DECLARATION AND CERTIFICATE OF UNDERSTANDING  
&  
PERMISSION TO OBTAIN INFORMATION**

I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate discharge from the employer's service, whenever it is discovered.

I give Tapani Underground, Inc., (hereinafter referred to as employer) the right to contact and obtain information from all references, current and former employers, and educational institutions and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability the employer and other representatives from seeking, gathering and using such information and all other persons, corporations or organization for furnishing such information.

I understand that the employer does not unlawfully discriminate in employment and no questions on this application will be used for the purpose of limiting or excusing any application from consideration for employment on a basis prohibited by local, state or federal law.

I understand that this application is current for only 90 calendar days. At that time, if I have not heard from the employer and still wish to be considered for employment, I will be required to fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or defined duration. I understand that no representative of the employer, other than an authorized officer, has the authority to make any assurances to the contrary. I further understand that such assurances must be in writing and signed by an authorized officer.

I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA. I also understand that if I need some form of accommodation to complete this application I am obligated to request that accommodation from the employer.

I also understand that if I am offered a position with employer, I will be required to provide proof of identity, legal work authorization, and pass a pre-employment drug test, and a non-discriminatory physical assessment screen as a condition precedent to my employment by employer.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

<b>Signature of Applicant:</b>	<b>Date:</b>
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**For Employer Use Only – Comments:**

- Application Reviewed Date: \_\_\_\_\_
- Application incomplete – File.       Application exceeds / does not meet qualifications – File.
- Application expired – File. Date: \_\_\_\_\_
- Application accepted, schedule for Phase 2.
- Phase 2 scheduled for Date: \_\_\_\_\_ Pass:  Yes     No – File     FTA - File
- Phase 4 scheduled for Date: \_\_\_\_\_ Pass:  Yes     No – File     FTA - File
- Conditional Offer Date: \_\_\_\_\_ Pass:  Yes     No – File     FTA - File
- Hire Date: \_\_\_\_\_

## APPLICANT INFORMATION FORM

Our organization conducts some business with governmental agencies which requires that we report certain information, such as race/ethnic background of applicants. Qualified applicants are considered for employment, and employees are considered during employment, without regard to race, color, religion, sex, national origin, age marital status, medical condition, or disability.

Providing this information is voluntary, and refusal to provide it will not result in any adverse treatment. However, your completion of this form will assist us in complying with equal opportunity/affirmation action record keeping and reporting requirements. This information form will be kept in a separate, confidential file.

Position Applied For: \_\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Gender:  Male  Female

### Race/ Ethnic Group (select one only):

- Hispanic or Latino – A person of Cuban, Mexican, Puerto Rican, Central or South American or other Spanish culture or origin, regardless of race.
- White – A person, not Hispanic or Latino, with origins in any of the original peoples of Europe, North Africa or the Middle East.
- Black – An individual, not Hispanic or Latino, with origins in any of the Black racial groups of Africa.
- Native Hawaiian or Other Pacific Islander – A person (not Hispanic or Latino) having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- Asian – A person (not Hispanic or Latino) with origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent. This area includes for example: Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- American Indian or Alaska Native – A person (not Hispanic or Latino) with origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
- Two or Mores Races – All persons (not Hispanic or Latino) who identify with more than one of the above five races.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

IF YOU HAVE A DISABILITY WHICH WILL IMPAIR YOUR ABILITY TO PERFORM IN THE SELECTION PROCESS. YOU ARE RESPONSIBLE TO CONTACT THE HUMAN RESOURCES DEPARTMENT TO ARRANGE FOR REASONABLE ACCOMODATION. IF YOU FEEL YOU HAVE BEEN TREATED UNFAIRLY OR DISCRIMINATED AGAINST BECAUSE OF RACE, COLOR, NATIONAL ORIGIN, SEX, AGE OR DISABILITY. PLEASE CONTACT THE HUMAN RESOURCES DEPARTMENT.