



A partner you trust. Experience that matters.

Pre-Employment

Packet A – 1

(Office, Sales, Tankerman, Warehouse)

Collect the following items based on job title:

Office/Sales

- *Driver License
- *Social Security Card
- *Resume (Optional)

Warehouse

- *Driver License
- *Social Security Card
- *Forklift Cert
- *Resume (Optional)

Tanker Man

- *Driver License
- *Social Security Card
- *Merchant's Marine
- *TWIC Card
- *Resume (Optional)



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Extraordinary Benefits Provided by O'Rourke Petroleum

INSURANCE BENEFITS

- PPO/HDHP Medical Insurance – O'Rourke pays majority of employee's monthly premium
- HMO/PPO Dental Insurance
- Health Savings Account/Flexible Spending Account
- Vision Insurance
- Basic Life and AD&D Insurance provided at no cost
- Supplemental Insurance including Voluntary Term Life, Voluntary Long Term Disability, Individual Short Term Disability, Accident Insurance and Critical Illness Insurance
- Employee Assistance Program
- Worldwide Travel Program

401(K) – RETIREMENT PLANNING

- 401(k) Safe Harbor Plan with Employer Match up to 4%
- Investment consultations available with a Financial Advisor

PAID TIME OFF

- Up to 5 weeks of Vacation per year
- Up to 40 hours of Vacation can be rolled over into the next year to be used by March 31st
- 8 paid Holidays
- 5 paid Personal days (40 hours); If over 80 hours are accumulated and unused, the hours will be paid out annually
- 3 paid Bereavement days

ADDITIONAL O'ROURKE PERKS

- Financial stability of 80+ year old company with solid leadership
- Open Door Policy to President and CEO
- Quarterly meetings held with the President of O'Rourke for all employees to discuss and communicate direction of company and progress
- Employee Incentive Programs available
- Safety Bonus Program available for 'safety sensitive positions' such as service reps, Tankermen and Warehouse CSRs
- O'Rourke University – offers additional job training for growth and development
- Fuel at discounted prices with FFM card
- Annual flu vaccinations for all employees



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Employment Application

The information given on this form is solely for the use of O'Rourke Petroleum and will be held in the strictest confidence. It will be to the applicant's advantage to answer each question fully and accurately. The use of this form does not indicate that there are any positions open and does not obligate the Company in any way.

Date

Please Print

Personal	Last Name	First Name	Middle	Email Address
	Present Address- Street	City, State	Zip Code	Contact Telephone Number
	Alternate Address- Street	City, State	Zip Code	Alternate Telephone Number
	Referred by	Date Available for Employment	Eligible to work in the United States? YES <input type="checkbox"/> NO <input type="checkbox"/>	
	Position (s) Applied For:	Starting Salary Desired	Geographical Locations Preferred	
	Are you willing to: Travel? YES <input type="checkbox"/> NO <input type="checkbox"/>	Work Overtime? YES <input type="checkbox"/> NO <input type="checkbox"/>	Transfer? YES <input type="checkbox"/> NO <input type="checkbox"/>	
	Are you at least 18 years of age? YES <input type="checkbox"/> NO <input type="checkbox"/>	Have you previously worked for our company? YES <input type="checkbox"/> NO <input type="checkbox"/>		

Must be completed in its entirety, including salary information.

Employment Background	1. Present (or last) Company Name			
	Address	City, State	Phone #	
	Dates: From-To	Starting Base Salary \$	Current Base Salary \$	May we contact? YES <input type="checkbox"/> NO <input type="checkbox"/>
	Job Title	Supervisor	Reason for Leaving	
	Brief description of duties (include number of persons supervised, if applicable)			
	2. Previous Employer Company Name			
	Address	City, State	Phone #	
	Dates: From-To	Starting Base Salary \$	Ending Base Salary \$	
	Job Title	Supervisor	Reason for Leaving	
	Brief description of duties (include number of persons supervised, if applicable)			
3. Previous Employer Company Name				
Address	City, State	Phone #		
Dates: From-To	Starting Base Salary \$	Ending Base Salary \$		
Job Title	Supervisor	Reason for Leaving		
Brief description of duties (include number of persons supervised, if applicable)				

O'ROURKE PETROLEUM, INC. IS AN EQUAL OPPORTUNITY EMPLOYER AND DOES NOT DISCRIMINATE AGAINST APPLICANT OF EMPLOYEES ON THE BASIS OF RACE, COLOR, SEX, AGE, RELIGION, NATIONAL ORIGIN, OR DISABILITY.

	Schools Attended and Location	Dates Attended		Major	Type of Degree	Grade Average		Date of Graduation (Month / Year)
		From	To			Overall	Major	
Education	High School				Diploma or GED Yes <input type="checkbox"/> No <input type="checkbox"/>			
	College							
	College							
	College							
	Special Awards or Recognitions					*If no degree obtained, indicate number of college credit hours completed		

Military	Active Duty Branch	Dates of Active Duty	Highest Rank Attained
	Reserve Status	Reserve Branch	

Criminal	Have you ever plead guilty or nolo contendere (no contest), received deferred adjudication, received probation, court ordered community supervision, pre-trial diversion, or been convicted of any criminal offense (felonies and misdemeanors) other than minor traffic citations?		
	If Yes, please list the date, nature, locations, and disposition:		YES <input type="checkbox"/> NO <input type="checkbox"/>

Skills	List office skills, trades, abilities, or license certifications that may be beneficial in the job for which you are applying.		
	Foreign Languages:	Degree of Proficiency: Speak <input type="checkbox"/> Read <input type="checkbox"/> Write <input type="checkbox"/>	

List three professional references most familiar with your abilities (supervisors preferred).

References	Name and Association	Occupation	Address	Phone Number	Years Known
	Name and Association	Occupation	Address	Phone Number	Years Known
	Name and Association	Occupation	Address	Phone Number	Years Known

APPLICANT'S STATEMENT (Applicant must review and sign below.)

I affirm that I have read and fully completed both sides of this application and all information as written above is true and correct, and I acknowledge that I may be terminated at any time if any information I supply is false. I acknowledge that this application will remain active for no more than 45 days. If I wish to be considered for employment after this 45 day period, I will reapply. I understand that if I am employed by O'Rourke Petroleum my employment and compensation can be terminated, with or without cause and with or without prior notice.

I authorize the references listed on this application to give you any and all information concerning my previous employment and pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

I hereby grant O'Rourke Petroleum the right and privilege to withhold, retain or deduct an amount up to and including the total amount of indebtedness, advances, charges for personal purchase on Company accounts, or any other amounts owed to O'Rourke Petroleum, or any of its affiliates, subsidiaries, or divisions, from any salary, wages, commissions, or any other debt owed to me by the Company.

I understand that I am required to abide by all rules and regulations of the Company. I acknowledge that these policies and procedures, and any benefits or other terms and conditions of my employment, may be changed, interpreted, withdrawn or added to by the Company at any time without prior notice to me.

SIGNATURE OF APPLICANT _____ **DATE** _____

ACKNOWLEDGMENT AND AUTHORIZATION FOR BACKGROUND CHECK

I acknowledge receipt of the separate document entitled DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by the Employer at any time after receipt of this authorization and throughout my employment, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by DISA GLOBAL SOLUTIONS, 12600 Northborough Dr., Suite 300, Houston, TX 77067, www.disa.com, 800-752-6432 and/or Employer itself. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

New York applicants only: Upon request, you will be informed whether or not a consumer report was requested by the Company, and if such report was requested, informed of the name and address of the consumer reporting agency that furnished the report. You have the right to inspect and receive a copy of any investigative consumer report requested by the Company by contacting the consumer reporting agency identified above directly. By signing below, you acknowledge receipt of Article 23-A of the New York Correction Law

Washington State applicants only: You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.

Minnesota and Oklahoma applicants only: Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Company.

California applicants only: Under California Civil Code section 1786.22, you are entitled to find out what is in the CRA's file on you with proper identification, as follows:

- In person, by visual inspection of your file during normal business hours and on reasonable notice. You also may request a copy of the information in person. The CRA may not charge you more than the actual copying costs for providing you with a copy of your file.
- A summary of all information contained in the CRA file on you that is required to be provided by the California Civil Code will be provided to you via telephone, if you have made a written request, with proper identification, for telephone disclosure, and the toll charge, if any, for the telephone call is prepaid by or charged directly to you.
- By requesting a copy be sent to a specified addressee by certified mail. CRAs complying with requests for certified mailings shall not be liable for disclosures to third parties caused by mishandling of mail after such mailings leave the CRAs.

"Proper Identification" includes documents such as a valid driver's license, social security account number, military identification card, and credit cards. Only if you cannot identify yourself with such information may the CRA require additional information concerning your employment and personal or family history in order to verify your identity. The CRA will provide trained personnel to explain any information furnished to you and will provide a written explanation of any coded information contained in files maintained on you. This written explanation will be provided whenever a file is provided to you for visual inspection. You may be accompanied by one other person of your choosing, who must furnish reasonable identification. An CRA may require you to furnish a written statement granting permission to the CRA to discuss your file in such person's presence.

Please check this box if you would like to receive a copy of an investigative consumer report or consumer credit report at no charge if one is obtained by the Company whenever you have a right to receive such a copy under California law.

Signature: _____

Date: _____



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DISCLOSURE REGARDING BACKGROUND INVESTIGATION

O'Rourke Petroleum ("the Company") may obtain information about you from a third party consumer reporting agency for employment purposes. Thus, you may be the subject of a "consumer report" and/or an "investigative consumer report" which may include information about your character, general reputation, personal characteristics, and/or mode of living, and which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may contain information regarding your credit history, criminal history, social security verification, motor vehicle records ("driving records"), verification of your education or employment history, or other background checks. Credit history will only be requested where such information is substantially related to the duties and responsibilities of the position for which you are applying.

You have the right, upon written request made within a reasonable time, to request whether a consumer report has been run about you, and disclosure of the nature and scope of any investigative consumer report and to request a copy of your report. Please be advised that the nature and scope of the most common form of investigative consumer report is an employment history or verification. These searches will be conducted by DISA GLOBAL SOLUTIONS, 12600 Northborough Dr., Suite 300, Houston, TX 77067, www.disa.com, 800-752-6432. The scope of this disclosure is all-encompassing, however, allowing the Company to obtain from any outside organization all manner of consumer reports throughout the course of your employment to the extent permitted by law.

Signature: _____

Date: _____

BACKGROUND INFORMATION

Last Name _____ First _____ Middle _____

Other Names/Alias _____

Social Security # _____ Date of Birth* _____

Driver's License # _____ State of Driver's License** _____

Present Address _____ Phone Number _____

City/State/Zip _____

Former Employer _____ Position _____ Dates Employed _____

By signing this form I hereby authorize, without reservation, any law enforcement agency, institution, information service, bureau, school, employer, reference, insurance company, or any other source contacted by DISA or its agent, to furnish the information described in Section 1. I hereby release the employer and agents and all persons, agencies, and entities providing information or reports about me from any and all liability arising out of the request for or release of any of the above-mentioned information or reports I acknowledge that I have read and understood the Employee Screening Release Authorization form. I understand that if hired my consent will apply throughout the term of my employment.

Signature: _____

Date: _____

*This information will be used for background screening purposes only and will not be used as hiring criteria.

Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.
- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information. Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.**
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.
- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567- 8688.
- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

TYPE OF BUSINESS:	CONTACT:
<p>1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates.</p> <p>b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:</p>	<p>a. Consumer Financial Protection Bureau 1700 G Street, NW Washington, DC 20552</p> <p>b. Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 (877) 382-4357</p>
<p>2. To the extent not included in item 1 above:</p> <p>a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks</p> <p>b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act</p> <p>c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations</p> <p>d. Federal Credit Unions</p>	<p>a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050</p> <p>b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480</p> <p>c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106</p> <p>d. National Credit Union Administration Office of Consumer Protection (OCP) Division of Consumer Compliance and Outreach (DCCO) 1775 Duke Street Alexandria, VA 22314</p>
<p>3. Air carriers</p>	<p>Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590</p>
<p>4. Creditors Subject to the Surface Transportation Board</p>	<p>Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423</p>
<p>5. Creditors Subject to the Packers and Stockyards Act, 1921</p>	<p>Nearest Packers and Stockyards Administration area supervisor</p>
<p>6. Small Business Investment Companies</p>	<p>Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, SW, 8th Floor Washington, DC 20416</p>
<p>7. Brokers and Dealers</p>	<p>Securities and Exchange Commission 100 F Street, NE Washington, DC 20549</p>
<p>8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations</p>	<p>Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090</p>
<p>9. Retailers, Finance Companies, and All Other Creditors Not Listed Above</p>	<p>FTC Regional Office for region in which the creditor operates or Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 (877) 382-4357</p>



An ISO 9001:2008 Certified Company

10468

O'ROURKE PETROLEUM DIST.

Universal Membership Application Form

DISA Contractors Consortium, 12600 Northborough, Suite 300, Houston, TX 77067

The Universal Membership Application Form is used to enroll employees in the national DISA Contractors Consortium (DCC), and/or the North American Substance Abuse Program (NASAP), and/or the DISA Contractors Consortium Hair Testing (DCCHT) policies. Each employee must complete this form prior to gaining admittance to any site requiring either of these programs.

Please fill this form out completely. **All fields marked with an asterisk (*) are required.** The form will not be able to be processed with incomplete information. This could result in a delay in enrolling the employee into the program. When the form is complete, please E-Mail the form to forms@disa.com or fax to (713)972-3431. For assistance completing this form, please contact your client service team at (281)673-2400 and select option 1.

For optimum accuracy, please print in capital letters and avoid contact with the edge of the box. Failure to fill the form out completely and legibly could delay processing of test results. The following example shows how letters should be drawn on the page:

A	B	C	D	E	F	G	H	I	J	K	L	M
N	O	P	Q	R	S	T	U	V	W	X	Y	Z

Last Name *	First Name *	M.I.

<input style="width:100%; height:100%;" type="text"/>	-	<input style="width:100%; height:100%;" type="text"/>	-	<input style="width:100%; height:100%;" type="text"/>	(<input style="width:100%; height:100%;" type="text"/>)	<input style="width:100%; height:100%;" type="text"/>	-	<input style="width:100%; height:100%;" type="text"/>
Social Security Number *		Home Phone Number *								

<input style="width:100%; height:100%;" type="text"/>	<input style="width:100%; height:100%;" type="text"/>
Location Code	Collection Site Code

It is no longer necessary to provide additional policy information when enrolling an employee in the DCC. To enroll your employee in your company policy or DOT program, simply send the employee to test with the proper form for that policy.

I have received and/or reviewed a copy of the DISA Contractors Consortium Substance Abuse Policy and/or North American Substance Abuse Program Policy and/or the Hair Testing Substance Abuse Program. I apply for membership in the DISA Contractors Consortium (DCC) and/or North American Substance Abuse Program (NASAP) and/or the Hair Testing Substance Abuse Program under the sponsorship of the Company Member indicated above. I agree, upon acceptance, to abide by all DCC and/or NASAP and/or the Hair Testing Substance Abuse Program policies, rules, and regulations. I authorize the DCC to release my drug and/or alcohol test results to the Company Member for which I worked at the time I was tested and/or the Company Member which required me to take a post-offer of employment drug and/or alcohol tests. I also authorize the DCC to release information about my status in the DCC to those companies on whose premises I seek to work or am currently working. I also authorize the DCC to release DCC status, test results, and other program activity to the Houston Area Contractors Safety Council through the NASAP with the understanding that this data may affect my status in the NASAP and that this status may be shared with those Companies participating in the NASAP. This release expires five years after the latest date on which I was no longer an "active" member of the Consortium. I understand I have a right to receive a copy of this authorization.

Applicant Signature * (Required to process application)	Date
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DISAWorks™

FOR INTERNAL USE ONLY

DW Universal V2.0
 Revision Date - 1/14
 Policy Id: 27312

1	1	1	1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4	4	4	4
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