



AP Transports, LLC.

INDEPENDENT PILOT CAR AGREEMENT

In order to be placed on our Preferred Subcontractors Data base as an AP Transports, LLC. Independent Contractor, you or anyone else working for you must agree to the following:

1. Maintain a valid driver's license, vehicle insurance and escorts certification(s) at all times, if any of these cancel any time, you are required to notify AP Transports, LLC. immediately.
2. Fully read, understand, and abide by the Specialized Carriers and Rigging Association's Pilot Cars and Escorts Best practices Guidelines.
3. Arrive at pick-up point at least 30 minutes prior to stated departure times.
4. Ensure all required equipment (including vehicle, lighting, signs, flags, height poles etc.) in clean working conditions.
5. Conduct yourself in a professional and courteous manner & protect the business interest of AP Transports, LLC. at all times.
6. Will not consume alcohol or drugs, (including prescription medication) that may impair your ability or judgment in the operation of your vehicle before or during escort.
7. Not have any passengers or pets (unless certified service animals) in vehicle during escort service.
8. Limit the use of mobile devices such as laptop, smart phones, or other similar entertainment devices (unless directly associated to the escort operation).
9. Maintain contact with AP Transports, LLC. agent from dispatch to completion and report any accidents, problems, delays or special circumstances while in route. Any additional charges such as but not limited to overnight charges downtime must be pre-approved by AP Transports, LLC.
10. No soliciting of AP Transports, LLC. customers or the drivers & inform AP Transports, LLC. of anyone one who approaches the pilot car by either.
11. Hold blameless or harmless & indemnify AP Transports, LLC. or its agents, employees, affiliates, successors against any and all claims, demands, loss, injury damages, actions whatsoever, which may be sustained while performing pilot/escort duties.

I, the undersigned pilot/escort hereby agree and will abide by all terms listed above, any breach of this agreement forfeits all due pay from AP Transports, LLC.

Signature

Printed name

Company

Date



Dear Prospective Carrier:

We will need the following information, BEFORE we can forward any load information. We look forward to working with you and your company and offer our appreciation in advance.

Call insurance company and request that they email AP Transports, LLC. Current certificate: of:

- a. Comprehensive automobile liability insurance
- b. Comprehensive general liability insurance

All of the above must name AP Transports, LLC. as an additional insured and certificate holder. Complete and sign the Carrier agreement.

In order to pay your invoices in a timely manner, carrier must send signed copy of trip sheet along with load / job number, truck number and trailer number.

Please feel free to contact us if you have any questions or concerns.

Sincerely,

Priscilla Soles

V.P.



INDEPENDENT CONTRACTOR'S AGREEMENT

BETWEEN:

CONTRACTOR:

AND

PAYER

NAME

_____ AP Transports, LLC. _____

ADDRESS

_____ PO BOX 4893 _____

CITY/STATE/ZIP

_____ Wilmington, NC 28406 _____

SSN/EIN

_____ 81-1289758 _____

I the above contractor understand that I am to be compensated for providing service to the above-mentioned payer. That I am responsible for all payroll and Income taxes on the aforementioned compensation (including) or (not including) worker's compensation premiums.

I further affirm that I (am) or (am not) licensed by the proper local governing authorities to perform such services.

Signature of Contractor

Date



Join Our Team

Date: _____

Fist Name: _____ MI. _____ Last Name: _____

DOB: _____ DL#: _____ Issue State: _____

Phone: _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____

Insurance: \$500,000 _____ \$1,000,000 _____ OTHER _____

What Pilot Car Services are you equipped, qualified and experienced to do? (Chase, Lead, High Pole, Route Survey, etc.) _____

Years Escorting _____ # Years Hi Pole _____ # Years Steer _____

Certs: NC _____ WA _____ NY _____ FL _____ KS _____ UT _____

VA _____ GA _____ NV _____ LA _____ OTHER _____

Signature

Printed name

Company



AP Transports, LLC.

VEHICLE OPERATOR'S CHECKLIST

Escort Driver's Name _____ Insurance Policy # _____
 State of License _____ Driver's License # _____
 Make/Model of Escort Veh _____ Expiration Date _____
 License Plate # _____ Driver's Certification # _____
 State of License Plate _____ Date of Expiration _____
 Vehicle Color _____

VEHICLE INSPECTION - Complete prior to each day's activity

Tires (+ spare): Check inflation, tread Jack and Lug Wrench
 Check Wheel Lugs Washer Fluid, Coolant, and Oil Levels
 Check Hoses, Belts, and Exhaust System Check Suspension
 Full Gas Tank Check Horn

EQUIPMENT - REQUIRED

Vehicle Flashing Amber Light
 Car or "OVERSIZE LOAD" Signs/Banners
 Two-Axle Truck Good 2 Way Radio
 17,000 Max G.V.W.R. (2) 20"x 20" Red/Orange Flags
 2,000 lb. Min V.W. 20" or 24" Stop/Slow Paddle
 Headlights Emergency Reflective Devices
 Beam 3 Triangles or
 Low Beam 6 Fuses or
 Turn Signals, Brake Lights 3 Liquid Flares
 Emergency Flashers High Visibility Vest/Jacket (min. class 2)
 Rear View Mirrors Fire Extinguisher (min 5 lb.; BC or ABC)
 Escort Business Identification Sign Non-Conductive Height Pole (if over height)
 Certified Escort Vehicle Op. Hand Book Insurance

EQUIPMENT -OPTIONAL

Roof Oversize Sign (Req. CT) (3) 36" Cones (Req. in FL)
 43" - 52" Amber Light Bar (NYS) NY Decals & Patch (Req. NY)
 (4) Red/Orange Flags for Bumpers Flashlight w/ min. 1 1/2" lens diam.
 9" min. Length Orange Cone for Flashlight Orange Hard Hat
 Hand Held Radio Marked First Aid Kit
 (2) 18" x 18" Red/Orange Flags on staffs
 (1) 18" x 18" Red or Orange Flag on a staff at least 36" long and should be weighted at the bottom w/
 3/16" dowel, rod or some other adequate weight
 (2) 5# (FL), AND (1) 10# Class 5 (NY) or larger BC rated Fire Extinguisher

PERSONAL - OPTIONAL

Extra Clothing and Toiletries for long trips Blanket
 Business License Lunch, Drinking Water
 Cash/Credit Card Local/State Maps
 Medications Rain Gear
 All Items Secured and Stored Cell Phone

Escort Driver's Signature & Date: _____

By signing this, you are stating that you have met all of the requirements of AP Transports Requirements



Requested info:

- 1) Copy of W-9
- 2) Insurance
- 3) Company info packet with names, numbers, addresses and emails
- 4) Copy of driver's license, certifications and permits

Please send with a signed copy of contract

AP Transports LLC.

Thank you,

AP Transports, LLC.