Bay Auto Parts Inc 1750 Velp Avenue #1 Green Bay, WI 54303 Sharp Auto Parts LLC 2910 Quant Ave. N. Stillwater, MN 55082

Employment Application v2016.04.21

Applying for: (Circle one or more)

- 1) Dismantler 2) Yard
- 3) Truck Driver 4) Warehouse

A pre-employment drug and alcohol test will be required for dismantler, driver, yard worker, and warehouse positions. Applicants who test positive for drugs or alcohol will not be hired. Employees in these positions are also enrolled in an ongoing random drug and alcohol testing program.

Follow instructions: Filling out an application does not guarantee that you will receive an interview. Applications must be complete. If you leave any blanks in your application it may be discarded. A resume may be attached to the application but may not substitute for an application. You must fill out an application even if you provide a resume. Fill out the application completely even if the information is also provided on your resume.

| First Name: _ | Today's Date: |
|------------------------------------|--|
| Last Name: _ | Middle Initial: |
| Address: | City: State: Zip Code: |
| Phone # : | 2nd phone number: |
| Do you have a | a valid driver's license? Yes / No Are you at least 18 years old? Yes / No |
| When could ye | ou start if we hired you?: |
| Do you have | actual experience in any of the following?: (add any details in the space provided) |
| Yes / No | Auto mechanical repair service: Name of shop(s): |
| Yes / No | Auto body or collision repair service: Name of shop: |
| Yes / No | Is your experience only from working on your own cars or the cars of family and friends? |
| Yes / No | All weather work outside: |
| Yes / No | Warehouse order picking, packing, and stocking: |
| Yes / No | Delivery driving: |
| Yes / No | Tow truck or roll-back driving and operation: |
| Yes / No | Have you ever worked in the auto recycling / salvage industry: |
| Yes / No | Have you ever applied here before? If yes, when: |
| Yes / No | Were you ever employed here before? If yes, when: |
| Yes / No | Do you have your own tools: |
| Yes / No | Do you have your own Air impact? Dismantlers MUST have an air impact on day one. |
| +++++++++ | +++++++++++++++++++++++++++++++++++++++ |
| Education an | d Training: |
| High School: _ | Graduated Yes / N |
| College or trade school: Graduated | |
| Military Service | e: |
| Other training | |

_____ Phone #: _____ Relationship to you: (boss, co-worker, teacher, etc.)_____ _____ Years this person has known you: __ _____ Phone #: _____ Relationship to you: (boss, co-worker, teacher, etc.)_____ Occupation: _____ Years this person has known you: _____ _____ Phone #: _____ Relationship to you: (boss, co-worker, teacher, etc.)_____ Years this person has known you: ____ Occupation: _____ What starting hourly (or equivalent) pay rate are you seeking: _____ Attendance and tardiness: How many different jobs have you had in the last 5 years?: How often have you been late for a job in the last 2 years?: _____ How many days have you been absent from a job in the last 2 years not including paid time off and holidays? ______ How would you describe your attendance and tardiness history?: Outstanding – Never late of absent at all for many years ____ Excellent – Late or absent less than 3 times per year Good – Late less than 6 times per year and absent less than 3 times per year ____ Average – Late less than 8 times per year and absent less than 4 times per year Less than average. Reason: We require a record of your last five years of employment. Please fill in each section below for all jobs you have had in the last 5 years. There are 4 sections. If you have had more than 4 jobs in the last 5 years, please make additional copies of these pages. If there are any gaps where you were unemployed for an extended period please explain. If you were a student please indicate that. Experience: Current or most recent job fill out completely Name of employer: ______ Type of Business: _____ Phone #: _____ Address: _____ State: ____ Zip: ___ City: ____ Your Job title when you worked here: _____ _____ Full Time or Part Time: _____ May we contact this employer?: _____ Name & title of supervisor:_____ Dates of employment at this job: From (month/year) _____ to (month/year) _____ Starting Pay Rate: _____ Final Pay Rate: _____ Number of hours worked per week: _____ Description of duties: Exact reason for leaving: _____

Please list some references: By listing references here you grant permission to us to contact them.

| Experience: Next most recent job fill out of | |
|--|---|
| | Type of Business: |
| | Phone #: |
| City: State: _ | |
| | Full Time or Part Time: |
| | & title of supervisor: |
| | /year) to (month/year) |
| | Number of hours worked per week: |
| Description of duties: | |
| Exact reason for leaving: | |
| ++++++++++++++++++++++++++++++++++++++ | -+++++++++++++++++++++++++++++++++++++ |
| Name of employer: | Type of Business: |
| Address: | Phone #: |
| City: State: _ | Zip: |
| Your Job title when you worked here: | Full Time or Part Time: |
| May we contact this employer?: Name | & title of supervisor: |
| Dates of employment at this job: From (month | /year) to (month/year) |
| Starting Pay Rate: Final Pay Rate: | Number of hours worked per week: |
| Description of duties: | |
| Exact reason for leaving: | |
| ++++++++++++++++++++++++++++++++++++++ | |
| Name of employer: | Type of Business: |
| Address: | Phone #: |
| City: State: _ | Zip: |
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| May we contact this employer?: Name | & title of supervisor: |
| Dates of employment at this job: From (month | /year) to (month/year) |
| | Number of hours worked per week: |
| Description of duties: | |
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| How did you hear of this job opening?: | |

| Additional que Yes / No | stions: Have you ever worked on an incentive pay system before? (flat rate, piece rate, commission) |
|-----------------------------------|---|
| Yes / No | Have you ever evacuated refrigerant from an A/C system? Are you certified? Yes / No |
| | Have you ever removed an air bag? |
| | Are you experienced operating a forklift? If yes, are you certified? Yes / No |
| | Do you have experience with UPS or FedEx shipping software? |
| Yes / No | Have you ever removed a motor from a vehicle? A Transmission? Yes / No |
| | +++++++++++++++++++++++++++++++++++++++ |
| | dequate transportation to and from work? Yes / No |
| • | ++++++++++++++++++++++++++++++++++++++ |
| | |
| | carefully before signing: y questions regarding the following statements, please ask for assistance. |
| questions and | o the best of my knowledge and belief, the answers given by me to the preceding statements made by me in this application are correct and complete. I understand that mation contained in this application may result in my discharge. |
| as references. | I to communicate with all of my former employers, school officials, and persons named I hereby release all employers, school officials, and individuals from any liability for thatsoever resulting from giving such information. |
| | nat as this organization deems necessary, I may be required to work overtime hours nally defined work day or work week. |
| regular heavy | r, yard, warehouse, and driver positions are physically strenuous jobs. They require lifting. There will be lots of bending, pushing, pulling, prying, and carrying. These ties will go on day after day. |
| Are you | u able to perform the essential functions of the job you are applying for? Yes / No |
| If no, w | hat accommodations would assist you? |
| without any lia understand tha | understand and agree that such employment may be terminated at any time and bility to me for any continuation of salary, wages, or employment related benefits. I at this application is for an employment-at-will position and that either party may employment at any time without notice. There is no contract for employment. |
| Signature: | Date: |
| | te this application yourself? Yes / No. If not, who helped you? |

Ability to follow instructions: Did you fill out the application completely?