

# LIBERTY HAULING, INC.

P. O. BOX 507, POLK CITY, FL 33868

DISPATCH: 863-412-3081/ 863-412-6757

OFFICE: 863-984-1462 / FAX: 863-984-1542

DOT DBE / Florida State Wide MWBE / Polk County MBE

City of Tampa WMBE & SBA / HILLSBOROUGH COUNTY DBE

[libertyrolls@aol.com](mailto:libertyrolls@aol.com) / [www.libertyhauling.ws](http://www.libertyhauling.ws)

## DOT-DBE Certified 6% WORK AGREEMENT BETWEEN:

### LIBERTY HAULING, INC. &

Owner/Operators are to maintain their equipment and operators in a responsible and dependable manner, having regular scheduled Safety Meetings.

When Prime Contractor requires, operators must wear safety gear, hard hat, vest, while on project site.

LIBERTY HAULING, INC. desires to let the Prime Contractors know that we are there to do a job that is efficient and profitable for them as well as for each operator and owner dispatched on their jobs. We all need to have an attitude that is willing to work diligently toward the Prime Contractors goal.

LIBERTY HAULING, INC. has 5 days to complete invoices and cut checks from date of Prime Contractors payment.

Owner/Operator agrees to keep a minimum 1,000,000 Liability coverage and keep a copy of active coverage on file with LIBERTY HAULING, INC. And a Workers Comp Policy or a Workers Comp Exempt on every driver dispatched.

NEXTEL or CELL # \_\_\_\_\_ OFFICE# \_\_\_\_\_

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

COMPANY ADDRESS: \_\_\_\_\_

TITLE: \_\_\_\_\_ PRINTED NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

COMPANY NAME: LIBERTY HAULING, INC.

COMPANY ADDRESS: 7145 EVERGREEN BLVD, POLK CITY, FL 33868

TITLE: PRESIDENT PRINTED NAME: CLARA RUTH WAGNER

SIGNATURE: \_\_\_\_\_ DATE \_\_\_\_\_