

Company Name: \_\_\_\_\_

Employer, (the “Company”) may obtain a consumer report about you from a consumer reporting agency for employment purposes (including contract or volunteer services). The report may include information about your character, general reputation, personal characteristics, and/or mode of living. These reports may contain information regarding your criminal history, social security number verification, motor vehicle records (‘driving records’) that include personal information, verification of your education or employment history, substance abuse testing, or other background checks.

I have read the DISCLOSURE REGARDING CONSUMER REPORT above.

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

Printed Name: \_\_\_\_\_

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

(This is a standalone document.)

Company Name: \_\_\_\_\_

**DISCLOSURE FOR INVESTIGATIVE CONSUMER REPORTS Employer, (the “Company”)** may obtain an “investigative consumer report” about you from a consumer reporting agency for employment purposes (including contract or volunteer services) and if you are hired, or if you are already associated with the Company, may obtain additional consumer reports on you for employment purposes. Such reports typically include information from personal interviews, most commonly from an applicant’s prior employers or references. The report may include information about your character, general reputation, personal characteristics, and/or mode of living. Information may be obtained from private and public record sources and personal interviews. You have the right to request more information about the nature and scope of an investigative consumer report, if any, by contacting **TSS INC. TSS INC. can be contacted at 120 Carlanna Lake Rd or by phone/fax at 907-247-1431 (phone) or 907-247-1432 (fax).**

I have read the DISCLOSURE FOR INVESTIGATIVE CONSUMER REPORT above.

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

Printed Name: \_\_\_\_\_

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

(This is a standalone document.)

**Company Name:** \_\_\_\_\_

**ACKNOWLEDGMENT AND AUTHORIZATION**

**IMPORTANT -- PLEASE READ CAREFULLY BEFORE SIGNING**

I hereby authorize procurement of "consumer reports" and/or "investigative consumer reports" at any time after receipt of this authorization and, if I am hired (including contract and volunteer services), throughout my employment (contract and volunteer services) with Company, as allowed by law. To this end, I hereby authorize, as allowed by law, 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 TSS INC., 120 Carlanna Lake Rd Ketchikan, AK 99901, [www.tss-safety.com](http://www.tss-safety.com), tel. 1-877-225-1431, fax 907-247-1432, another outside organization acting on behalf of the Company, and/or the Company itself. I authorize these agencies to provide Company with consumer and investigative consumer reports. I agree that a facsimile ("fax"), electronic or photographic copy of this Acknowledgment and Authorization shall be as valid as the original. I understand that if driving a company vehicle (or my own vehicle, as required) is a requirement of the position I am being considered for, then having and maintaining a satisfactory driving record and being able to legally and safely drive is required for my employment. If applicable, I agree to allow the Company or its Agent to check my driving record, which contains personal information and may contain information about my physical, mental, or behavioral health maintained by a state government agency that has restricted my ability to drive legally, prior to hire and on an ongoing or periodic basis thereafter. A driving record may also be obtained to verify my identity. I understand that if drug and/or alcohol testing is requested, I authorize collection site personnel, medical review officer or employer representative to obtain the information necessary to comply applicable laws and with the Company's drug and alcohol policy. I acknowledge that I have been provided the employer's drug and alcohol testing (substance abuse) policy, if applicable. The scope of this authorization will allow the Company to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and, if I am hired (including contract or volunteer services), throughout the course of my employment (including contract or volunteer services), to the extent permitted by law. As a result, I should carefully consider whether to exercise my right to request disclosure of the nature and scope of any investigative consumer report.

I understand that by signing and dating below:

- I authorize the Company to procure the consumer report(s) described above (including driving records, if applicable, or substance abuse testing, if permitted by law) from or through Hire Image;
- To the extent applicable, I authorize the Company to share reports with third party companies for whom I may be placed to perform services;
- I consent to transacting electronically, including receiving legally required notices electronically; • I have received and read the Disclosure Regarding Background Investigation and the Disclosure for Investigative Consumer Reports;
- I have received and read the State/County/City Specific Rights of Applicants or Employees Regarding Background Investigation;
- I have read the Acknowledgment and Authorization above.

Signature of Applicant	Social Security Number	Date of Birth
Print Name (First, Middle, Last)	Today's Date	Driver's License # & State

Any previous names

\_\_\_\_\_

Current Address (include City, State and Zip)

*\*\* This information will be used for background screening purposes only and no other purpose.*

## STATE/COUNTY/CITY SPECIFIC RIGHTS OF APPLICANTS OR EMPLOYEES REGARDING BACKGROUND INVESTIGATION

**Specific to CA, MN, NY, OK applicants or employees but available to all applicants or employees:**

You have the right to promptly receive and inspect a copy of any consumer report, consumer investigative report, or consumer credit report requested on you by the Company, at no charge, by contacting the Company, or, contact the consumer reporting agency, **TSS INC. at [www.tss-safety.com](http://www.tss-safety.com) or tel. 1-877-225-1431.**

Check here to receive a copy of your consumer report directly from the Company.

**California applicants or employees:**

By signing below, you also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW. If you did not receive a copy of the Notice, please contact **TSS INC. at [www.tss-safety.com](http://www.tss-safety.com) or tel. 1-877-225-1431**, to request a copy.

**City or County of San Francisco applicants or employees:**

By signing below, you also acknowledge the Company's posting of the Fair Chance Ordinance (San Francisco Police Code, Article 49). If you would like a copy of the Ordinance, please contact **TSS INC. at [www.tss-safety.com](http://www.tss-safety.com) or tel. 1-877-225-1431**, to request a copy, or visit: <http://sfgov.org/olse/fair-chance-ordinance-fco>

**City of Los Angeles applicants or employees:**

By signing below, you also acknowledge the Company's posting of the Fair Chance Initiative for Hiring Ordinance (FCIHO) (LAAC 10.48). If you would like a copy of the Initiative, please contact **TSS INC. at [www.tss-safety.com](http://www.tss-safety.com) or tel. 1-877-225-1431**, to request a copy, or visit: <http://bca.lacity.org/fair-chance>

**New York applicants or employees:**

By signing below, you acknowledge receipt of Article 23-A of the New York Correction Law. If you would like to receive Article 23- A, please contact **TSS INC. at [www.tss-safety.com](http://www.tss-safety.com) or tel. 1-877-225-1431**, to request a copy, or visit <https://www.labor.ny.gov/formsdocs/wp/correction-law-article-23a.pdf>

**New York City applicants ONLY:**

By signing below, you acknowledge receipt of the New York City Fair Chance Act Notice. If you would like a copy, please contact **TSS INC. at [www.tss-safety.com](http://www.tss-safety.com) or tel. 1-877-225-1431.**

**Rhode Island applicants or employees:**

By signing below, you acknowledge receipt of the Rhode Island Consumer Empowerment & Identity Theft Prevention Act of 2006. If you did not receive a copy, contact **TSS INC. at [www.tss-safety.com](http://www.tss-safety.com) or tel. 1-877-225-1431**, to request a copy.

**Washington State applicants or employees:**

You have the right to request from the consumer reporting agency a written summary of your rights and remedies under Washington state laws. Contact **TSS INC. at [www.tss-safety.com](http://www.tss-safety.com) or tel. 1-877-225-1431**, to request a copy. You may also contact the Washington Attorney General, Consumer Protection Division, 800 5 th Ave. Suite 2000, Seattle, WA 98104-3188.

**I have read the STATE/COUNTY/CITY SPECIFIC RIGHTS OF APPLICANTS OR EMPLOYEES above.**

---

**Signature of Applicant****Print Name****Date****Toll Free: 877-225-1431****[www.tss-safety.com](http://www.tss-safety.com)****[info@tss-safety.com](mailto:info@tss-safety.com)**

Revised 02/03/2023