

CENVAR ROOFING

ACKNOWLEDGMENT AND WAGE WITHHOLDING AUTHORIZATION

I acknowledge that I have received a copy of the Employee Handbook for Good's Construction Co., LLC, doing business as Cenvar Roofing ("the Company"), and understand that it is my responsibility to read and comply with the policies contained therein and any revisions made to it. Furthermore, I acknowledge that this Handbook is not a contract of employment.

I became an employee at the Company voluntarily. I understand and acknowledge that there is no specified length to my employment and that my employment is at will. I understand and acknowledge that "at will" means that I may terminate my employment at any time, with or without cause. I also understand and acknowledge that "at will" means that the Company may terminate my employment at any time, with or without cause.

I understand and acknowledge that there may be changes to the information, policies, and benefits in the Handbook. I understand that the Company may add new policies to the Handbook as well as replace, change, or cancel existing policies.

In consideration of the Company furnishing equipment to me for my use at no cost to me, and also in consideration of the Company occasionally providing hotel or other housing accommodations for me at no cost to me while I am working at a jobsite far from home, I agree as follows:

- If I do not return the Company's property in the same condition as when it was issued to me, I agree that the Company may withhold money from my regular or final paychecks to cover the cost of the missing or damaged property to the fullest extent permitted by law.
- If I intentionally or recklessly damage the property of another while on a job assignment with the Company, I agree that the Company may withhold money from my regular or final paychecks to cover the cost of the damage to the fullest extent permitted by law.
- I agree that upon termination, any money that I owe the Company and any insurance or tool money that has not been collected will be collected in full out of my last paycheck.

EMPLOYEE'S NAME (printed) _____

EMPLOYEE'S SIGNATURE: _____

DATE: _____