

HEALTH AND SAFETY POLICY

ClusterTruck, LLC along with its subsidiaries and affiliates ("ClusterTruck"), is committed to maintaining a healthy and safe environment for its food products. To further its goal, ClusterTruck may issue safety guidelines from time to time. We recommend that you comply with all ClusterTruck's guidelines, as well as any applicable federal, state, and local laws regarding food safety, and keep your delivery vehicle organized and free of any potential hazards. If you witness any unsafe conditions or potential hazards, please report them to a representative of ClusterTruck as soon as possible.

IN CONSIDERATION OF BEING PERMITTED TO PARTICIPATE AS A MEAL DELIVERY AGENT, I AGREE TO REPORT AND EXCUSE MYSELF FROM PROVIDING ANY SERVICES TO CLUSTERTRUCK WHEN:

1. I have any current symptoms of illness, including:

- diarrhea,
- vomiting,
- jaundice (yellowing of the skin and/or eyes), sore throat with fever, infected cuts or wounds, or
- lesions containing pus on the hand, wrist, an exposed body part (such as boils and infected wounds, however small).

2. I have any diagnosed illnesses, including:

- Norovirus,
- Salmonella Typhi (typhoid fever),
- Shigella spp. Infection,
- E. coli infection (Escherichia coli 0157: H7 or other EHEC/STEC infection), or
- Hepatitis A.

3. I have been exposed to any illness listed in #1 or #2 above through:

- an outbreak of Norovirus, typhoid fever, Shigella spp. infection, E. coli infection, or Hepatitis A,
- a household member with Norovirus, typhoid fever, Shigella spp. infection, E. coli infection, or hepatitis A, or
- a household member attending or working in a setting with an outbreak of Norovirus, typhoid fever, Shigella spp. infection, E. coli infection, or Hepatitis A.

If I have excused myself from work for having diarrhea and/or vomiting, **I WILL NOT PROVIDE ANY SERVICES TO CLUSTERTRUCK UNTIL MORE THAN 24 HOURS HAVE PASSED** since my last symptoms of diarrhea and/or vomiting.

If I have excused myself from work for exhibiting symptoms of a sore throat with fever or for having jaundice (yellowing of the skin and/or eyes), Norovirus, Salmonella Typhi (typhoid fever), Shigella spp. infection, E. coli infection, and/or Hepatitis A, **I WILL NOT PROVIDE**

**ANY SERVICES TO CLUSTERTRUCK UNTIL HEALTH DEPARTMENT APPROVAL
HAS BEEN GRANTED.**