

Date: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

RE: Owner Operator Resignation Letter

Drivers DOB: _____

CDL Number: _____ State: _____

Reason for Leaving Company: _____

Attention: HR Department

By this letter I _____ am notifying human recourses department that my services to MMM Express Inc. will end as of _____. I understand that I will no longer have Occupational Accidental Insurance Coverage under MMM Express Inc. insurance policy. I am also aware that my truck and trailer will be taken off the liability and cargo insurance therefore, I will be responsible for all collisions or any other damages. I understand that I need to take all MMM Express Inc. decals off my truck, turn in Bills of Lading for all loads that I have delivered; Log books and maintenance reports need to be submitted to proper departments. I also understand that by me stopping providing services to MMM Express Inc. I must pay in full deductible for at fault accidents that I was involved in and damages that I have caused to equipment owned by MMM Express Inc.

Should you have any question please call _____.

Sincerely,

Contract Driver

MMM Express Inc.