**General Agreement between Delivery Biz Group LLC and Independent Delivery Driver**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Independent Delivery Driver) acknowledge that I am an independent food delivery driver and am not an employee of Delivery Biz Group LLC. I also acknowledge that during delivery hours for Delivery Biz Group LLC and its contracted affiliated restaurants, in the event of an automobile or delivery-related accident, I will be fully responsible for any damages or injuries to myself or other parties, if applicable, and would seek compensation through my personal automobile insurance.

With consent and by signing this agreement, the independent driver acknowledges that in cases of negligence—such as delayed or undelivered orders, forgotten or mixed food items, wrong delivery addresses, or inappropriate or rude behavior towards customers or restaurant staff—Delivery Biz Group LLC will withhold 10% from the delivery driver's paycheck.

Delivery Biz Group LLC will also apply a 10% penalty fee from the delivery driver's paycheck if the delivery driver fails to provide Delivery Biz Group LLC with a three-day resignation notice.

By signing this agreement, the independent driver is aware and acknowledges that he/she will receive a 1099 form from Delivery Biz Group LLC for the tips and delivery charges paid to the independent driver by Delivery Biz Group LLC.

In general, both Delivery Biz Group LLC and the independent delivery driver agree to indemnify and hold each other and its affiliated restaurants harmless from and against any demand or claim, including reasonable attorney's fees and costs, made by any third party due to an automobile accident or other work-related incident during delivery hours, the violation of this Agreement, or any legal complaints that arise from doing business together.

**Signatures of Parties to this Agreement:**

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| **Company Name:** | **Delivery Biz Group LLC** |
| **Company Representative Printed Name:** | **Joylyn Quintana** |
| **Company Representative Signature:** |  |
| **Date:** |  |
| **Independent Delivery Driver Printed Name:** |  |
| **Social Security Number of Independent Delivery Driver:** |  |
| **Address:** |  |
| **Signature of Independent Delivery Driver:** |  |
| **Date:** |  |