**Phase B — Signed Forms**

# Employee Safety Onboarding Acknowledgment

Form: **SAFETY-OB-001** · Rev. July 1, 2025 · Cal. Labor Code §6401.9 / Cal/OSHA Title 8 §3203 & §3395/3396 · Retain 5 years

**Hammer Head Security** · 4551 South B Street, Stockton, CA 95206 · 209-227-6566

| EMPLOYEE NAME | EMPLOYEE ID | JOB TITLE |
|---|---|---|
| Lisette Inez Diaz | 5051 | Security Officer |

| WORK LOCATION / SITE | START DATE |
|---|---|
| Camera Aivres - Milpitas | 09/24/2026 |

**Direct Supervisor HR**

**HR Coordinator HR**

**WORK ENVIRONMENT CHECK ALL THAT APPLY**

- [X] Outdoor work
- [X] Indoor work
- [ ] Both

**1. Workplace Violence Prevention Plan (WVPP) — Cal. Labor Code §6401.9 / SB 553**

**WVPP ACKNOWLEDGMENT**

I have received access to the company's WVPP and understand its requirements. I acknowledge that the WVPP is accessible to me at all times upon request and that this is my initial onboarding training. Annual refresher training will be documented on a separate form.

- [X] I understand the definitions and four types of workplace violence (Type I–IV).
- [X] I know how to report workplace violence incidents, threats, or concerning behavior to my supervisor.
- [X] I am aware of the Violent Incident Log and my right to review it (retained 5 years).
- [X] I understand that retaliation for reporting workplace violence is prohibited under Labor Code §6310.
- [X] I know the emergency response procedures for a violent incident at this worksite.

**WVPP Effective Date HR fills**

**WVPP Version No. HR fills**

**2. Heat Illness Prevention — Cal/OSHA Title 8 §3395 (Outdoor) / §3396 (Indoor, eff. June 2024)**

**HEAT ILLNESS PREVENTION ACKNOWLEDGMENT**

I have received training on heat illness prevention applicable to my work environment. I understand that this is my initial onboarding training and that annual refresher training will be documented separately.

☒ **Water:** I am entitled to at least 1 quart/hour of cool, clean, fresh drinking water at no cost.

☒ **Shade:** I may access shade at any time and take a minimum 5-minute cool-down rest — this cannot be denied.

☒ **Temps:** Shade required >=80°F (outdoor); high-heat procedures required >=95°F outdoor / 87°F indoor.

☒ **Symptoms:** I can identify signs of heat cramps, heat exhaustion, and heat stroke and know to call 911 for heat stroke.

☒ **Acclimatization:** I understand the schedule for my first 14 days working in heat — I will follow it and report any symptoms.

☒ **Buddy System:** I will monitor coworkers for symptoms and report to my supervisor immediately if I feel unwell.

**TRAINING DATE AUTO: DATE SIGNED**

**Trainer Name HR fills**

**3. Injury & Illness Prevention Program (IIPP) — Cal/OSHA Title 8, §3203**

**IIPP ACKNOWLEDGMENT**

I have received access to the company's IIPP and completed the safety orientation covering the topics below. I understand that the IIPP is available for review at any time upon request.

☒ I will follow all safety rules, safe work practices, and PPE requirements for my job.

☒ I will immediately report ALL injuries, illnesses, near-misses, and unsafe conditions to my supervisor.

☒ **HazCom / GHS:** I have been informed of chemicals I may encounter, how to read SDS, and where SDS are located.

☒ I understand the emergency action plan, evacuation routes, and assembly points for this worksite.

☒ **Workers' Comp:** I understand my right to file a claim and that retaliation for doing so is unlawful under Labor Code §132a.

☒ I understand that safety violations may result in disciplinary action up to and including termination.

**ORIENTATION DATE AUTO: DATE SIGNED**

**Safety Officer / Trainer HR fills**

**Hazardous Materials / Substances Applicable to Assignment HR fills**

First aid kit supplies, post-specific cleaning materials

**SDS Location HR fills**

Hammer Head Security — 4551 South B Street, Stockton, CA 95206 / Company HR Portal

**EMPLOYEE RIGHTS & ANTI-RETALIATION — CAL/OSHA (LABOR CODE §6310)**

All employees have the right to report unsafe working conditions, workplace hazards, or safety violations without fear of retaliation. Complaints may be filed confidentially with Cal/OSHA at **1-800-963-9424** or online at **dir.ca.gov/dosh**. Hammer Head Security strictly prohibits retaliation of any kind against any employee who reports a safety concern, files a complaint, or exercises any right under California labor law. Violations of this policy will result in disciplinary action up to and including termination.

*By signing, I confirm that: (1) I have received onboarding training on all three programs listed above; (2) I have had the opportunity to ask questions; (3) I understand my responsibilities and rights; and (4) I agree to comply with all company safety policies. This form does not constitute a contract of employment or alter my at-will employment status.*

**Supervisor / HR Attestation:** I certify that the above employee received onboarding training on all programs documented on this form. HR Coordinator: **—** · Orientation By: **—**

SIGNATURE

Lisette Diaz

Signed 09/24/2026 18:53

# 90-Day Introductory (Probationary) Period Acknowledgment

| EMPLOYEE NAME | EMPLOYEE ID | POSITION |
|---|---|---|
| Lisette Inez Diaz | 5051 | Security Officer |

**DATE OF HIRE**

09/24/2026

### PURPOSE OF INTRODUCTORY PERIOD

I understand that the first ninety (90) days of employment constitute an introductory (Introductory) period. This period allows the Company to evaluate my: job performance; reliability and attendance; compliance with company policies and procedures; ability to safely perform assigned duties; and professional conduct with clients, the public, and coworkers. The introductory period does not guarantee employment for any specific duration, and employment may be terminated at any time during or after this period, consistent with at-will employment.

### AT-WILL EMPLOYMENT

I understand that my employment with Hammer Head Security is at-will, meaning employment may be terminated by me or the Company at any time, with or without cause or notice, subject to applicable California law. Nothing in this agreement alters or modifies my at-will employment status.

### PERFORMANCE EXPECTATIONS

During the introductory period, I am expected to: maintain a valid BSIS Guard Registration and all required permits at all times; follow all post orders, company policies, and client directives; comply with all Cal/OSHA safety requirements, including reporting hazards, injuries, and unsafe conditions immediately; maintain professional conduct, punctuality, and proper uniform standards; and perform all duties safely and effectively.

### IMMEDIATE TERMINATION CONDITIONS (CRITICAL VIOLATIONS)

The following may result in disciplinary action, up to and including immediate termination, subject to applicable law: expired, suspended, or invalid BSIS Guard Card or required permits; post abandonment or failure to remain on assigned duty without authorization; falsification of reports, time records, or company documents; theft, dishonesty, or misconduct; violation of safety rules creating a serious risk to persons or property; possession of weapons or prohibited items in violation of company policy or law; being under the influence of drugs or alcohol while on duty.

### ATTENDANCE & RELIABILITY REQUIREMENTS

I understand that reliable attendance is an essential job function. During the introductory period: excessive absenteeism, tardiness, or failure to report to scheduled shifts may result in discipline up to and including termination; failure to properly notify the Company of an absence in accordance with company policy may be treated as a no-call/no-show; multiple no-call/no-show occurrences may be considered job abandonment.

### OVERTIME & SCHEDULE FLEXIBILITY

I understand that the nature of security services requires flexibility in scheduling to meet operational and client needs. My work schedule may include days, nights, weekends, holidays, and extended shifts. I may be required to work overtime, including last-minute or emergency coverage, as permitted by law. All overtime will be compensated in accordance with California wage and hour laws. I must obtain prior authorization from management before working overtime, unless required due to an emergency or operational necessity.

**USE OF FORCE & INCIDENT REPORTING**

I understand that as a security officer, my primary role is to observe and report, deter incidents, and act within the limits of my training, Company policy, and applicable law. I will only use force when legally justified and permitted under Company policy and applicable law. All incidents must be reported immediately to the Company and documented accurately. All reports must be truthful, complete, and accurate.

**CELL PHONE & DISTRACTION POLICY**

I understand that maintaining constant awareness and attentiveness is an essential function of my role. Personal cell phone use while on duty is strictly limited and may only be used in accordance with Company policy. I will not use my phone or other personal devices in a manner that interferes with my duties, including while monitoring posts, conducting patrols, or observing surveillance systems.

*By signing, I acknowledge that I have read and understand this agreement; I understand my employment is at-will; I agree to comply with all Company policies, safety rules, and legal requirements; and the contents of this agreement were reviewed and discussed with me during orientation.*

**COMPANY REPRESENTATIVE**

Rachel Resurreccion

SIGNATURE

Lisette Diaz

Signed 09/24/2026 18:53

# Use of Force Policy Acknowledgment

| EMPLOYEE NAME | EMPLOYEE ID | POSITION |
|---|---|---|
| Lisette Inez Diaz | 5051 | Security Officer |

**DATE**

09/24/2026

**2. LEGAL COMPLIANCE STATEMENT**

I understand that this policy is intended to comply with: applicable California law, including provisions of the California Penal Code governing use of force and citizen's arrest; Bureau of Security and Investigative Services (BSIS) requirements and training standards; and applicable federal legal standards regarding objective reasonableness, based on the totality of circumstances.

**3. STATUS AS PRIVATE SECURITY**

I understand that: I am not a peace officer; I have no authority beyond that of a private person under California law; and my authority is limited to: observation and reporting; deterrence and prevention; and lawful citizen's arrest (Penal Code §837) when legally justified.

**4. USE OF FORCE STANDARD**

I understand and agree that: force may only be used when legally justified and reasonably necessary; any use of force must be proportional to the threat, objectively reasonable under the circumstances, and limited to the minimum amount necessary; and force must be immediately discontinued once the threat has ended.

**5. DE-ESCALATION REQUIREMENT**

I understand that I am required to: attempt verbal de-escalation and conflict resolution whenever safe and feasible; and avoid physical confrontation whenever possible.

**6. PROHIBITED CONDUCT**

I understand that the following are strictly prohibited: excessive, unreasonable, or unnecessary force; retaliatory, punitive, or emotionally driven force; use of chokeholds, carotid restraints, or airway-restricting techniques; and use of force outside Company policy, assigned duties, training, or the law.

**8. REPORTING REQUIREMENT**

I understand that I must: immediately report any use of force, regardless of severity; notify a supervisor without delay; and complete accurate, complete, and truthful reports. Failure to report or falsification of information may result in disciplinary action, up to and including termination.

**12. PERSONAL LIABILITY ACKNOWLEDGMENT**

I understand that improper, excessive, or unlawful use of force may result in: personal civil liability; and criminal prosecution. I further understand that the Company may deny defense or indemnification for actions taken outside policy, training, assigned duties, or applicable law.

*By signing, I acknowledge that: I received this policy during onboarding; I understand its contents; I agree to comply fully; and I understand the legal and personal consequences of violating this policy. I confirm that this Use of Force Policy has been provided to me and reviewed with me during my onboarding/orientation.*

EMPLOYER REPRESENTATIVE NAME

Rachel Resurreccion

SIGNATURE

Lisette Diaz

Signed 09/24/2026 18:53

# Use of Personal Vehicles on Duty Policy

| EMPLOYEE NAME | EMPLOYEE ID | POSITION |
|---|---|---|
| Lisette Inez Diaz | 5051 | Security Officer |

**DATE**

09/24/2026

**2. POLICY STATEMENT**

Hammer Head Security maintains strict control over patrol methods and transportation to ensure safety, regulatory compliance, and operational consistency. The use of personal vehicles while on duty is strictly prohibited unless expressly authorized in advance in writing under this policy.

**3. PATROL TYPE RULES (STRICT ENFORCEMENT)**

I understand and agree to the following: Foot Patrol Sites — No vehicle use is permitted under any circumstances. All duties must be performed on foot only. Vehicle Patrol Sites — Patrol duties must be conducted only using company-provided vehicles. Personal vehicles are not permitted. I understand that I may not modify patrol methods, substitute patrol types, or use any vehicle unless specifically assigned and authorized.

**4. PROHIBITED USE OF PERSONAL VEHICLES**

I understand that I am not authorized to use my personal vehicle for any work-related purpose, including but not limited to: patrol routes or site inspections; responding to incidents; transporting equipment or personnel; or traveling between posts or locations during a shift (unless expressly directed under this policy).

**5. LIMITED EXCEPTION (WRITTEN AUTHORIZATION REQUIRED)**

A personal vehicle may only be used if I receive prior written authorization from the Company's Safety / Risk / Compliance Department, and the authorization clearly defines the scope, duration, and purpose of such use. As part of the authorization process, the Safety / Risk / Compliance Department will verify my valid driver's license, vehicle registration, and active insurance coverage. Verbal approval or approval from supervisors or managers is not valid and will not be relied upon. No employee is required or expected to use a personal vehicle unless formally authorized under this policy.

**8. VIOLATIONS**

I understand that: unauthorized use of a personal vehicle is a violation of Company policy; such violations may result in disciplinary action, up to and including removal from duty and termination of employment; and failure to follow this policy may result in denial of liability coverage to the extent permitted by law.

*I certify that: I received this policy during orientation; I fully understand that I am not permitted to use my personal vehicle unless I have prior written authorization under this policy; I understand that I may not rely on verbal instructions that conflict with this policy; and I agree to comply fully with this policy as a condition of my employment.*

**EMPLOYER REPRESENTATIVE NAME**

Rachel Resurreccion

SIGNATURE

Lisette Diaz
Signed 09/24/2026 18:53

# Driver Requirements, Company Vehicle Use & EPN Compliance

| EMPLOYEE NAME | EMPLOYEE ID | POSITION |
|---|---|---|
| Lisette Inez Diaz | 5051 | Security Officer |

| DATE | DRIVER'S LICENSE # | DL EXPIRY |
|---|---|---|
| 09/24/2026 | | |

**3. STRICT COMPANY VEHICLE USE POLICY**

Employees may only operate Company-owned vehicles that are: properly registered and insured; maintained in accordance with Company standards; and operated in compliance with applicable laws and BSIS requirements (including vehicle marking, where applicable). No supervisor, manager, or employee has authority to override this policy. Any exception must be formally approved in writing by the Company's executive management and Safety/Risk Compliance function. Use of personal vehicles for any Company business is strictly prohibited. No exceptions. No reimbursement-based use. Any unauthorized use of a personal vehicle is considered outside the course and scope of employment to the extent permitted by law.

**5. DRIVER'S LICENSE REQUIREMENT**

Employees must: maintain a valid, active, and unrestricted California Driver's License at all times; and be legally eligible to operate the assigned vehicle. Driving with a suspended, revoked, restricted, or expired license is strictly prohibited and will result in immediate removal from driving duties.

**6. DMV EMPLOYER PULL NOTICE (EPN) PROGRAM**

Employees assigned driving duties must: complete DMV Form INF 1101 (Authorization for Release of Driver Record Information); and authorize the Company to enroll and monitor their driving record through the DMV. I understand that: this authorization is voluntary; however, it is required to perform driving-related job duties; and the Company may receive notifications regarding license suspensions, revocations, or expirations, and traffic violations and reportable incidents. Refusal to participate will result in ineligibility for driving duties.

**8. MANDATORY REPORTING OBLIGATION (CRITICAL REQUIREMENT)**

Employees must notify the Company within 24 hours of: license suspension, revocation, restriction, or expiration; any traffic citation or violation; any accident (on-duty or off-duty, whether or not it involves Company business, if it may affect insurability); and any DUI or driving-related criminal matter. Failure to report may result in disciplinary action.

**10. PROHIBITED CONDUCT**

Employees are strictly prohibited from: driving under the influence of drugs, alcohol, or impairing substances; driving with an invalid or suspended license; using Company vehicles for personal purposes; allowing unauthorized individuals to operate Company vehicles; and operating vehicles in violation of Company policy or applicable law.

*By signing, I acknowledge that: I have received, read, and understand this policy; I agree to fully comply with its terms; and I understand that compliance is required if I am assigned driving duties.*

SIGNATURE



Signed 09/24/2026 18:53

# Sexual Harassment Prevention Training Acknowledgment

| EMPLOYEE NAME | EMPLOYEE ID | POSITION |
|---|---|---|
| Lisette Inez Diaz | 5051 | Security Officer |

**DATE**

09/24/2026

**1. ACKNOWLEDGMENT OF TRAINING REQUIREMENT**

I acknowledge that I have been informed during orientation that Hammer Head Security is committed to maintaining a workplace free from sexual harassment, discrimination, retaliation, and abusive conduct (including workplace bullying). I understand that, in compliance with California law (including Government Code §12950.1) and applicable federal law, I am required to complete sexual harassment prevention training as a condition of employment.

**2. TRAINING OBLIGATION**

I understand and agree to the following: I am required to complete mandatory sexual harassment prevention training within the legally required timeframe: Supervisors — at least 2 hours of training; Non-supervisory employees — at least 1 hour of training. Training must be completed within six (6) months of , or earlier if required by the Company. I may be required to complete refresher training every two (2) years. If I am a temporary or seasonal employee, training may be required within 30 calendar days or 100 hours worked, whichever occurs first, if applicable.

**3. TRAINING CONTENT AND STANDARDS**

I understand that the training provided: will meet the requirements established by the California Civil Rights Department (CRD) (formerly DFEH); and will include instruction on sexual harassment prevention; discrimination and retaliation prevention; abusive conduct (including workplace bullying); and bystander intervention strategies and prevention techniques.

**4. POLICY ACKNOWLEDGMENT**

I acknowledge that: I have received access to the Company's Anti-Harassment, Anti-Discrimination, and Anti-Retaliation Policy; I understand that harassment, discrimination, retaliation, and abusive conduct are strictly prohibited; and I am responsible for complying with all Company policies and procedures.

**5. REPORTING RESPONSIBILITY**

I understand that I must immediately report any incidents of sexual harassment, discrimination, retaliation, or abusive conduct. Reports may be made to: a supervisor or manager; Human Resources; or any designated Company representative. I understand that the Company strictly prohibits retaliation against any employee who makes a good faith complaint or participates in an investigation. I understand I am not required to report concerns to my direct supervisor and may report to any available reporting channel.

**6. FAILURE TO COMPLETE TRAINING**

I understand that failure to complete required training within the designated timeframe may result in disciplinary action, up to and including termination of employment.

*By signing, I acknowledge that: I have been informed of my training obligations; I understand the Company\'s policies regarding harassment and workplace conduct; and I agree to complete all required training and comply with all*

*Company policies.*

**EMPLOYER REPRESENTATIVE NAME**

Rachel Resurreccion

SIGNATURE

Lisette Diaz

Signed 09/24/2026 18:53

# Acknowledgment of Receipt of Required New Hire Notices

| EMPLOYEE NAME | POSITION | DATE OF HIRE |
| --- | --- | --- |
| Lisette Inez Diaz | Security Officer | 09/24/2026 |

I acknowledge that during my onboarding and new hire orientation with Hammer Head Security, I received copies of, or was provided access to, the following required notices, brochures, and informational materials:

- DE 2515 – Disability Insurance Provisions Brochure
- DE 2511 – Paid Family Leave Brochure
- DE 2320 – California's Programs for the Unemployed Brochure
- Sexual Harassment Fact Sheet
- Victims of Domestic Violence, Sexual Assault, Stalking, and Related Crimes Leave and Accommodation Notice
- Time of Hire Notice
- California Know Your Rights Notice

*By signing, I acknowledge that I received the above-listed documents during the onboarding process. I understand that my signature acknowledges receipt of these materials only and does not necessarily indicate agreement with their contents. I understand that it is my responsibility to review the information provided and to seek clarification from management or Human Resources if I have any questions regarding these notices or my rights and responsibilities.*

**MANAGER / REPRESENTATIVE**

Rachel Resurreccion

SIGNATURE

Lisette Diaz

Signed 09/24/2026 18:53