ALCOHOL AND/OR CONTROLLED SUBSTANCE TEST NOTIFICATION

Part 382 - Controlled Substances and Alcohol Use Testing applies to drivers of this company.

49 CFR, Part 382.113 Requirement for notice.

Before performing an alcohol or controlled substances test under this part, each employer shall notify a driver that the alcohol or controlled substances test is required by this part. No employer shall falsely represent that a test is administered under this part.

Company name:_____

Driver/Applicant Name (printed):_____

You are hereby notified the following test will be administered in compliance with the Federal Motor Carrier Safety Regulations.

1. The test is scheduled: Date: _____
   Location: _____
   Time: _____

2. Check type of test: ☐ Alcohol ☐ Controlled Substance

3. Reason for test: ☐Pre-employment ☐Random ☐Reasonable suspicion/cause
   ☐Post-accident ☐Return to duty ☐Follow-up

4. Appointment instructions/comments: _____

   _____

   _____

I understand as a condition of my employment with this company, the above test is required.

Driver/Applicant's signature: _____

Date: _____

Witnessed by: _____

Date: _____

Employer: Retain in employee's confidential file.