



## SUNLINE TRANSIT AGENCY ORDER FOR TESTING

The Federal Transit Administration has promulgated Title 49 CFR Parts 40 & 655 that require all safety-sensitive employees/applicants to submit to drug and alcohol testing as a condition of employment or continued employment within a safety-sensitive position. Refusal to submit to testing, providing false information in connection with said testing, adulterating, substituting, tampering with the specimen, or failure to cooperate with any part of the collection process is a violation of the regulations and of company policy. Testing is to be accomplished no later than this date, time and at the location indicated below.  
**You must present this form at the collection site.**

Driver's Legal Name:	Driver's Employee ID/SSN:
Driver's CDL #:	Issuing State:
Assigned Collection Site:	
You must report, and provide a valid sample(s), shown below, no later than: _____ AM/PM _____ (date) <i>(Failure to report by the time indicated, without valid explanation, will be considered a "Refusal To Test")</i>	
DATE ISSUED TO DRIVER:	TIME ISSUED TO DRIVER:
<b>Driver's Signature:</b>	<b>Ordering DER Signature:</b>

### TESTING REQUESTED

<b>Test Type:</b>	Urine Drug Testing	Breath Alcohol	BOTH
<b>Testing Authority:</b>	D.O.T.	Company Policy	Other
<b>Reason For Testing:</b>	Pre-Employment	Pool Re-Entry(90 Days out)	Random
	Post Accident	Reasonable Cause	R.T.D.
	Follow-Up	Re-Test, Specify:	
<b>Direct Observation Required:</b>	NO	YES, Explain:	
<b>Driver Transported for Testing:</b>	NO	Yes, Explain:	
<b>Picture ID Available:</b>	CDL	Company ID	Other
<b>Special Instructions/Remarks:</b>			

### COLLECTION SITE Information:

**FORENSIC**  
DRUG TESTING SERVICES, INC.  
DOT 49 CFR 40.101 40.102 40.103 40.104

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