FORENSIC
DRUG TESTING SERVICES, INC

73700 Dinah Shore Drive, Suite B206
Palm Desert, CA 92211-0815
(760) 770-6068

EMPLOYMENT DRUG TEST ORDER FORM

E-Mail to: results@fdtsi.com or Fax (760) 770-0806

COMPANY: | **Requesting DER:**

DONOR: | **CDL # & D.O.B.:**

Donor's SSN/ID: | **Collection Site:**

Deadline Date/Time: | **Reason for Test:**

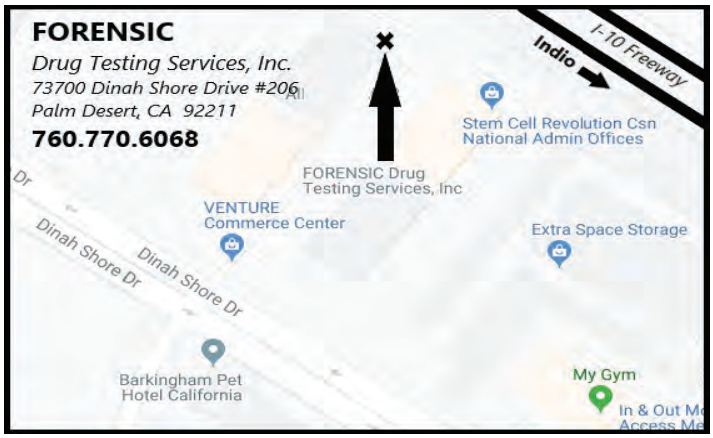
Test Requested: | **Regulated by:**

In Random Pool?: | **Direct Observation?** ☐ **Yes** ☐ **NO**

D.E.R. Notes:

PRINT

Clear Form



D.O.T. - F.M.C.S.A. DRUG & ALCOHOL CLEARINGHOUSE ORDER

The United States Department of Transportation, Federal Motor Carrier Safety Administration (DOT-FMCSA) now mandates employers to perform pre-paid "queries" into their CDL Drug & Alcohol Clearinghouse, once a year, on all regulated drivers and all new drivers, prior to placement. This can be found on the DOT website link at www.fdtsi.com, under Title 49 CFR Part 382.701-727.

If you need to conduct a "Full" Pre-Employment Query, please indicate your desired service below.

Driver's Legal Name *(as shown on CDL):*

Driver's License Number: | **Issuing State:**

Driver's Date of Birth: | **SSN/ID:**

Services Requested:

SUBMIT FORM

☐ **Run Full Pre-Employment Query** *(Add $15.00)*

☐ **HELP MY DRIVER Register within your office** *(Add $20.00)*

☐ **Run My Annual Limited Query of all my DOT-FMCSA Regulated Drivers** *on, or no later than, this date:* *(Add $15.00 Each)*