

## **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
E 3rd St.  Santa Ana Ca Oper Shop  Imperial Manor Oper Shop  EEI Centro	E 2nd St  W Maranatha Steakhouse  FORENSIC Drug Testing - IMPERIAL  FORENSIC Drug Testing Services, Inc. 612 S. J Street #8, Imperial 760.355.0796	FORENSIC  Drug Testing Services, Inc. 73700 Dinah Shore Drive #20 Palm Desert, CA 92211 760.770.6068  Or  VENTURE Commerce Olnah Shore Dr.  Barkingham Pet Hotel California	Stem Cell Revolution Csn National Admin Offices  FORENSIC Drug Testing Services, Inc
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:	´ L	Issuing State:	
Driver's Date of Birth:		SSN/ID:	
Services Requested:			
	oyment Query (Add \$15.00)	on, or no later tha	MCSA Regulated Drivers
THE WIT DISTANCE IN	9.0.0	(Add \$15.00 Each)	

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