

**General Consent for Limited Queries of the Federal Motor Carrier Safety Administration (FMCSA) Drug and Alcohol Clearinghouse**

I, \_\_\_\_\_ (Driver Name),  
hereby provide consent to \_\_\_\_\_ (Company Name) to conduct a limited  
query of the FMCSA Commercial Driver's License Drug and Alcohol Clearinghouse  
(Clearinghouse) to determine whether drug or alcohol violation information about me exists in  
the Clearinghouse.

I understand that if the limited query conducted by \_\_\_\_\_ (Company Name)  
indicates that drug or alcohol violation information about me exists in the Clearinghouse,  
FMCSA will not disclose that information to the Company without first obtaining additional  
specific consent from me. I further understand that if I refuse to provide consent to conduct a  
limited query of the Clearinghouse, \_\_\_\_\_ (Company Name) must prohibit me from  
performing safety-sensitive functions, including driving a commercial motor vehicle, as required  
by FMCSA's drug and alcohol program regulations.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date