Consent for Limited Queries of the Federal Motor Carrier Safety Administration Drug and Alcohol Clearinghouse

l,	hereby provide consent to
FMCSA Commercial Driver's License Drug and Alcohol Cleadetermine whether drug and/or alcohol violation information Clearinghouse.	
The duration of this consent is for: • the entire length of my employment.	
 The frequency of the limited queries for this consent is for no less than once per year, but no limit is set to the conduct each year or during the duration of my er 	ne number of queries the Company can
I understand that if the limited query conducted by the Coviolation information about me exists in the Clearinghouse Administration (FMCSA) will not disclose that information obtaining additional specific consent from me.	e, the Federal Motor Carrier Safety
I further understand that if I refuse to provide consent for queries of the Clearinghouse, the Company must prohibit functions, including driving a commercial motor vehicle, a alcohol program regulations.	me from performing safety-sensitive
PLEASE PRINT CLEARLY AND COMPLETE THE FOLLOWING	TO PROVIDE CONSENT:
Printed Driver Name	DL# & State
Driver Signature	 Date