

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

I, \_\_\_\_\_, hereby provide consent to \_\_\_\_\_ for the purpose of conducting limited queries 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. This authorization is valid for the duration of my employment. This authorization allows \_\_\_\_\_ to conduct at least one limited query annually, but \_\_\_\_\_ may perform additional limited queries during a calendar year. I understand that if the limited query conducted by \_\_\_\_\_ indicates that drug or alcohol violation information about me exists in the Clearinghouse, the FMCSA will not disclose that information to \_\_\_\_\_ without first obtaining a specific electronic consent from me to conduct a full query. I understand I will be required to register with the Clearinghouse in order to grant electronic consent for any full query. I further understand that if I refuse to provide consent for \_\_\_\_\_ to conduct a limited or full query (when a limited query reports that information exists) of the Clearinghouse, \_\_\_\_\_ must prohibit me from performing safety-sensitive functions, including driving a commercial motor vehicle, as required by FMCSA's drug and alcohol program regulations.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Driver's License Number

\_\_\_\_\_  
State of Issue