ONSITE SAFETY SOLUTIONS

O: 256.427.4777
F: 256.693.5999
26760 Newby Road
Athens, Al 35613

GET DIRECTIONS

SCAN ME

AUTHORIZATION FORM

email: info@onsitesafetysolutions.com

Company: _____ **Date/Time:** _____

Applicant/Employee Name: _____ **Date of Birth:** _____

Authorized by: _____ **Contact Number:** _____

Reason for service: (CIRCLE ONE) PRE-EMPLOYMENT RANDOM POST-ACCIDENT REASONABLE CAUSE RETURN TO WORK CDL

Please perform the following services:

Physical Exam

- ☐ DOT
- ☐ NON-DOT
- ☐ USCG
- ☐ Fit for Duty
- ☐ Bus Driver

Other: _____

_____

_____

Substance Abuse Testing

- ☐ DOT - Urine 5 Panel

Non-DOT Options

- ☐ Urine - RAPID
- ☐ Urine- Send Out
- ☐ Oral/Saliva
- ☐ Hair Follicle

Breath Alcohol Test

- ☐ DOT
- ☐ Non-DOT

ask about our 24/7 service availability
ask about scheduling ONSITE services

Other Testing/Surviellance

- ☐ Audiogram
- ☐ Pulmonary Function Test
- ☐ Resp. Clearance Questionnaire
- ☐ Chest X-ray
- ☐ Mask Fit Test
  - Type of Mask: _____

_____