



## COLLECTOR SERVICES

If you're interested in providing occupational testing services for our clients, and if we have clients in your area that is interested in using your facility for one or more of your services listed below, please complete the following information.

Facility Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address 2: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

E:mail: \_\_\_\_\_

Days & Hours of Operation:

Monday	_____	to	_____
Tuesday	_____	to	_____
Wednesday	_____	to	_____
Thursday	_____	to	_____
Friday	_____	to	_____
Saturday	_____	to	_____
Sunday	_____	to	_____

Person Responsible for completing this form:

Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

Date: \_\_\_\_\_

DESCRIPTION OF SERVICES	YES	NO	IF YES, PRICE
Do you provide Non-DOT Urine Drug Screen Collections?			
Do you provide DOT Urine Drug Screen Collections?			
Do you perform Breath Alcohol Testing?			

DESCRIPTION OF SERVICES	YES	NO	IF YES, PRICE
Do you perform Breath Alcohol Confirmation Testing?			
Do you perform Hair Collections?			
Do you provide Non-DOT Physicals?			
Do you provide DOT Physicals?			
Do you require appointments for Urine Drug Screen Collections?			
Do you have Medtox Kits on hand?			
Do you have Quest kits on hand?			
Do you have Labcorp kits on hand?			
If you do not have kits on hand, would you be willing to store collection supplies for our clients?			
DESCRIPTION OF ON-SITE SERVICES	YES	NO	IF YES, PRICE
Do you provide On-Site Non-DOT Urine Drug Screen Collections?			
Do you provide On-Site DOT Urine Drug Screen Collections?			
Do you perform On-Site Breath Alcohol Testing?			
Do you perform On-Site Breath Alcohol Confirmation Testing?			
Do you perform On-Site Hair Collections?			
On-Site, No Show/Cancellation Fee?			
On-Site Observed Collection Fee?			
On-Site Per Event Fee?			
On-Site Wait-Time Fee?			
On-Site Mileage Fee?			
On-Site Hourly Fee?			
DESCRIPTION OF AFTER HOURS SERVICES	YES	NO	IF YES, PRICE
Do you provide After Hours Services? (If yes, please complete below)			
After Hours Event/ Hourly Fee?			
Do you provide After Hours Non- DOT Urine Drug Screen Collections?			
Do you provide After Hours DOT Urine Drug Screen Collections?			
Do you perform After Hours Breath Alcohol Testing?			
Do you perform After Hours Breath Alcohol Confirmation Testing?			
Do you perform After Hours Hair Collections?			
DESCRIPTION OF ON-SITE AFTER HOURS SERVICES	YES	NO	IF YES, PRICE
Do you provide On-Site After Hours Services?			
On-Site After Hours Event/Hourly Fee?			
Do you provide On-Site After Hours Non- DOT Urine Drug Screen Collections?			
Do you provide On-Site After Hours DOT Urine Drug Screen Collections?			
Do you perform On-Site After Hours Breath Alcohol Testing?			
Do you perform On-Site After Hours Breath Alcohol Confirmation Testing?			
Do you perform On-Site After Hours Hair Collections?			

Please fax back all information to Safety & Compliance Services as soon as possible. If you have any questions, please feel free to contact us at (540) 344-4676.

Thank you!