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DOT REASONABLE SUSPICION TEST REQUEST

Supervisors: Please complete this form and provide it to the collection site.

The City of Boise is requesting the following test(s):

- DOT Reasonable Suspicion Breath Alcohol Test**
- DOT Reasonable Suspicion Drug Screen**

Note: Only check both boxes if alcohol AND drug impairment are suspected.

The test(s) is to be administered to:

Employee Name: _____

Employee ID#/SSN: _____

Today's Date & Time: _____

Important Information for Supervisors:

For after-hours testing please call **208-870-9174**.

Within 24 hours of the test, the supervisor shall complete a reasonable suspicion form [See Drug-Free Workplace Policy Exhibit 4.20d] identifying the signs which formed the basis to warrant the testing, and forward the completed form to Human Resources.

Information for Collection Site:

Contacts: City of Boise: Rudy Gloria (P) 208-972-8096 (F) 208-384-3868
Wienhoff Drug Testing Services, Inc. (P) 208-376-5600 (F) 208-376-5665

Laboratory Information
Quest Diagnostics
10101 Renner Blvd
Lenexa, KS 66219
P: 800-877-7484
Account Number: 10580870

MRO Information
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