



**DRUG & ALCOHOL TESTING - NEW ACCOUNT SET UP**

Company Name:		Start Date:
Add 1:	Phone:	
Add 2:	Fax:	
City:	State:	Zip:
DER (main) Contact:	e-mail:	
Phone:	Results: <input type="checkbox"/> e-mail, <input type="checkbox"/> secure fax, <input type="checkbox"/> web	
Billing Contact:	e-mail:	
Phone:	Results: <input type="checkbox"/> e-mail, <input type="checkbox"/> secure fax, <input type="checkbox"/> web	
For Additional Contacts or Locations Please Use Separate Page 2: <input type="checkbox"/> yes <input type="checkbox"/> not applicable		

Client Specific Information - Check All That Apply, Leave Blank if Not Applicable		
Client Type: <input type="checkbox"/> DOT <input type="checkbox"/> Non DOT <input type="checkbox"/> PUC	<input type="checkbox"/> Specimen Collection Only Account	
DOT Agency: <input type="checkbox"/> FMCSA <input type="checkbox"/> PHMSA <input type="checkbox"/> USCG <input type="checkbox"/> FAA <input type="checkbox"/> FTA <input type="checkbox"/> FRA	# Current Employees: _____	
Specimen Type: <input type="checkbox"/> urine <input type="checkbox"/> hair <input type="checkbox"/> oral fluid	U.S. DOT # _____	CA-TCP # _____
Panel Requested: <input type="checkbox"/> 5 panel <input type="checkbox"/> 10 panel <input type="checkbox"/> Expanded Opiates Other: _____		
Instant Product: <input type="checkbox"/> Conf Account Lab:	Standard Lab: <input type="checkbox"/> LabCorp <input checked="" type="checkbox"/> Quest <input type="checkbox"/> Alere	
Breath Alcohol Level for Positive: <input type="checkbox"/> .02 <input type="checkbox"/> .04 <input type="checkbox"/> .05 <input type="checkbox"/> .06 <input type="checkbox"/> .08	DOT is Always 0.04 <input type="checkbox"/>	
DOT Random: <input type="checkbox"/> Stand Alone <input type="checkbox"/> Consortium Pool	<input type="checkbox"/> Policy Needed: <input type="checkbox"/> DOT <input type="checkbox"/> Non DOT	
NON DOT Random: <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly <input type="checkbox"/> Other: _____	Annual Percentage: _____	
Random Lists To: Name: _____	email: _____	
Previous DOT Random Program this Calendar Year: How many complete? Drug: _____ Alcohol: _____ Average Pool Size: _____		

<b>Special Notes:</b>

<b>How Did You Hear About Our Company:</b>

<b>For Office Use:</b>	
Lab:	Account # 's:
Site Code:	Cust Upd: <input type="checkbox"/>
QB Entry: <input type="checkbox"/> Pmt.Entry: / / Type CC/ DB/CHK	Empl Upd: <input type="checkbox"/>
WCL : / /	Date Complete: _____ REP # _____

LGS DRUG TESTING C/TPA SERVICES, P.O. BOX 1194, UPLAND, CA 91785-1194  
 VOICE: (909) 979-0547 FAX: 909) 935-3847 E-MAIL: [info@lgsdrugtesting.com](mailto:info@lgsdrugtesting.com)

**Additional Contacts:**

Contact 2:	Results: <input type="checkbox"/> e-mail, <input type="checkbox"/> fax, <input type="checkbox"/> web
Phone:	e-mail:
Results Filter: All Company: <input type="checkbox"/> OR Location:	

Contact 2:	Results: <input type="checkbox"/> e-mail, <input type="checkbox"/> fax, <input type="checkbox"/> web
Phone:	e-mail:
Results Filter: All Company: <input type="checkbox"/> OR Location:	

Contact 2:	Results: <input type="checkbox"/> e-mail, <input type="checkbox"/> fax, <input type="checkbox"/> web
Phone:	e-mail:
Results Filter: All Company: <input type="checkbox"/> OR Location:	

**Additional Locations**

Location Name:	Phone:	
Add 1:	Fax:	
Add 2:		
City:	State:	Zip:
Location Contact:	Results: <input type="checkbox"/> e-mail, <input type="checkbox"/> fax, <input type="checkbox"/> web	
Phone:	e-mail:	

Location Name:	Phone:	
Add 1:	Fax:	
Add 2:		
City:	State:	Zip:
Location Contact:	Results: <input type="checkbox"/> e-mail, <input type="checkbox"/> fax, <input type="checkbox"/> web	
Phone:	e-mail:	

Location Name:	Phone:	
Add 1:	Fax:	
Add 2:		
City:	State:	Zip:
Location Contact:	Results: <input type="checkbox"/> e-mail, <input type="checkbox"/> fax, <input type="checkbox"/> web	
Phone:	e-mail:	

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## Employer Drug & Alcohol Testing Proposal:

**ATTN: Designated Employer Representative (DER)**

Specific Services and Pricing on Page 2

LGS Drug Testing provides high quality drug testing services designed to keep your company in compliance with Federal and State Laws and to reduce your exposure to liability.

### Drug & Alcohol Testing Programs Include:

- 20 + years' experience
- Drug testing to include specimen collection, initial test and lab GC/MS confirmation
- Local and national facilities for drug screen collections and breath alcohol testing
- Toll free on going consultation and administrative support
- SAMHSA certified laboratories, certified urine collectors and certified breath alcohol technicians
- Cutting edge Web-based technology used for program management, recordkeeping, random selections, scheduling and reporting of test results
- Paperless scheduling and ordering for non-DOT testing at fixed facilities
- Compliance with State, Federal and DOT regulations

### What We Do Best:

- Nationwide Locations
- Experience and Professionalism
- Technology for efficiency
- Ongoing Consultation
- Fast Turnaround
- Compliance with State Laws and DOT regulations
- Competitive and fair pricing
- Confidential
- Full time Medical Review Officers (MRO)

### Robust Technology – This is the latest in Drug Testing Management Software

- All web based – no software to install, no software updates to purchase
- Increased efficiency, expanded access, complete visibility, unlimited users
- Automated random program management system

#### Questions:

Call or Email: [info@lgsdrugtesting.com](mailto:info@lgsdrugtesting.com), (909) 979-0547, Ext. 705. Toll Free: 866-434-8418

## Program Service & Pricing

Program Service & Pricing	
<b>DRUG &amp; ALCOHOL TESTING</b>	
<b>Fixed Facilities – walk in collection: urine drug testing – collection, initial test, confirmation and MRO with electronic donor registration, scheduling and reporting:</b>	
5 Panel in Network	\$47.00
10 Panel in Network	\$48.00
DOT 5 Panel with Expanded Opiates (1-1-2018)	\$49.00
Confirmation Only Per Drug	\$56.00
Quest Diagnostics PSC Collection Site	Included
Quest Diagnostics In-Network Collection Site	\$17.00
Out of Network Collection Site – Additional Fee will apply	\$20and Up
Breath Alcohol Test - Initial Test	\$45.00
Breath Alcohol Test- Confirmation Test	\$45.00
Consortium Random Pool Administration Per Year	\$100.00
Stand Alone Random Pool Administration Per Year	\$150.00
Owner Operators - Includes any drug and or alcohol tests annually within our collection site network. Driver's Name _____SSN# _____	\$125.00-Annually
DOT MIS Reporting	Included
DOT Audit Assistance	Included
DOT Blind Specimens	Included
On Line DOT Supervisor Training Program, per license	\$33.00
On Line DOT Employee Training Program, per license	\$15.00
DOT Physical Examination Record and Storage Fee Per Donor	\$7.50
DOT D&L Isomer Testing - Beyond Standard Lab Testing	\$85.00
DOT Drug Free Workplace Policy Manual – includes comprehensive instructions, written custom policy, employee education materials, supervisor training materials, required forms, required posting, copy of all up to date regulations.	\$350.00
Hair 5	\$77.00
Hair + Exp Opiates	\$97.00
Oral Fluid 5 – Includes Laboratory Confirmation and MRO	\$41.00
Oral Fluid 5 Exp Opiates - Includes Laboratory Confirmation and MRO	\$45.00
Oral Fluid- 9 panel with Exp Opiates- Includes Laboratory Confirmation and MRO	\$48.00
Oral Fluid-10 panel Includes - Laboratory Confirmation and MRO	\$41.00
Non-DOT (list State) _____Drug Free State Program - Drug Free Workplace Policy Manual: includes comprehensive instructions, written custom policy, employee education materials, supervisor training materials, required forms, copy of all up to date regulations and filing for State Discount on Workers Compensation Discount, if applicable.	\$350.00
One Time Set-Up Fee – Immediate Enrollment Certificate Issued	\$25.00
<b>TOTAL Start Up Fees:</b>	<b>\$</b>

Customer Approval:

Name:	Title:
Signature:	Date:

Please return by email or fax to: [accounts@lgsdrugtesting.com](mailto:accounts@lgsdrugtesting.com) or Fax to: 909-935-3847  
 Welcome Documents, Enrollment Certificate and Service Agreement to follow