



**DISA Global Solutions - IND**



**IBEW #481/Quality Connection Drug Test**

**Authorization Form**

SERVICE NEEDED: 9 PANEL (66634N) NON-DOT COLLECTION

**DONOR NAME:**

**LAST 4 SSN:**

**CITY, STATE, ZIP:**

**CURRENT CONTRACTOR:**

**DATE OF COLLECTION:**

**REASON FOR TEST: (Please check one)**

<input type="checkbox"/> Pre-Employment	<input type="checkbox"/> Random	<input type="checkbox"/> Reasonable Suspicion / Cause	<input type="checkbox"/> Other / Annual
<input type="checkbox"/> Post Accident	<input type="checkbox"/> Return to Duty	<input type="checkbox"/> Follow-Up	

**Please check only one box:**

<input type="checkbox"/> Journeyman/Wireman/Technician	<input type="checkbox"/> Apprentice	<input type="checkbox"/> Traveler: Home local _____
<input type="checkbox"/> Trainee	<input type="checkbox"/> Construction Electrician	<input type="checkbox"/> N/A PRE-EMPLOYMENT

**Keep your copy of the Chain of Custody form given at the collection site.**

**INFORMATION for the COLLECTION SITE:**

DISA Global Solutions is the THIRD-PARTY ADMINISTRATOR for IBEW 481. Arrangements were made with your collection site to perform these services.

<b>PLEASE CHECK TO MAKE SURE THE FOLLOWING IS COMPLETED:</b>
<b>URINE COLLECTION:</b>
(1) Urine collection is a split collection.
(2) Panel number is 66634N
(3) Add contractor name from above to the chain of custody in Step 1.
(4) Arrange for FedEx pickup same day of collection.
(5) <b>Fax and email the MRO copy and authorization form to DISA Global Solutions at 317-262-2222 (FAX) <a href="mailto:IndianaUnionForms@disa.com">IndianaUnionForms@disa.com</a> (EMAIL)</b>

**INVOICE DISA Global Solutions FOR ALL SERVICES PERFORMED:**

DISA Global Solutions  
11740 Katy Freeway, Suite 900  
Houston, TX 77079

**QUESTIONS OR PROBLEMS:** Monday – Friday, 7:30 a.m. to 5:00 p.m., call DISA Team 3 at 317-269-3003. **After Hours, please call DISA at (281) 673-2400.**

**THIS FORM MUST BE PRESENTED AT THE COLLECTION SITE**