

**General Consent: Limited Queries of the
Federal Motor Carrier Safety Administration (FMCSA)
Drug and Alcohol Clearinghouse**

I hereby provide consent to **SUNY – BUFFALO (University at Buffalo)** and their Third-Party Administrator (TPA), **Energetix Corp** to conduct a *limited query* of the FMCSA Commercial Driver’s License Drug and Alcohol Clearinghouse¹ as long as I am employed by **SUNY – BUFFALO (University at Buffalo)**, to determine whether drug or alcohol violation information about me exists in the Clearinghouse.

I understand if the *limited query* conducted by **SUNY - BUFFALO (University at Buffalo)** - or **Energetix Corp** indicates drug and alcohol violation information about me exists in the Clearinghouse, FMCSA will not disclose that information without first obtaining specific consent from me.

I further understand if I refuse to provide consent for **SUNY - BUFFALO (University at Buffalo)** or **Energetix Corp** to conduct a *limited query* of the Clearinghouse, **SUNY - BUFFALO (University at Buffalo)** must prohibit me from performing safety-sensitive functions, including driving a commercial motor vehicle, as required by FMCSA’s drug and alcohol program regulations.

Employee

Printed Name of Employee: _____

Signature of Employee: _____

Date: _____

¹ Information on the Federal Motor Carrier Safety Administration (FMCSA) Drug and Alcohol Clearinghouse is available at <https://www.fmcsa.dot.gov/regulations/commercial-drivers-license-drug-and-alcohol-clearinghouse>