



RELEASE OF CDL HOLDER'S REPORTED POSITIVE ALCOHOL OR CONTROLLED SUBSTANCE TEST RESULTS



Use this form to obtain the CDL holder's reported positive alcohol or controlled substance test results information.

This form should ONLY be used if you wish to inquire whether or not a prospective driver (CDL Holder) has had a positive alcohol or controlled substance test result reported to the Texas Department of Public Safety in compliance with state law.

**THIS FORM IS NOT REQUIRED FOR REPORTING A POSITIVE
ALCOHOL OR CONTROLLED SUBSTANCE TEST.**

1. This form must be completed in full and include the driver's original signature.
(Electronic signatures will not be accepted)

2. Deliver, mail, Email or FAX the completed form to:

**Texas Department of Public Safety
Motor Carrier Bureau, MSC #0521
6200 Guadalupe, Building P
Austin, Texas 78752-4019 / Facsimile: 512-424-5310
Email: MCB.VPR@dps.texas.gov**

Check here if CDL Holder is requesting results on self

_____ ,
Print Name of CDL Holder Phone Number

_____ ,
Print full Address, City, State and Zip Code of CDL Holder Social Security #

Driver License Number of CDL Holder _____ State _____ Date of Birth _____

authorize release of any and all of CDL holder's reported positive alcohol or controlled substance test results reported under Texas state law to

City of McAllen-Human Resources Department _____ (956) 681-1045 _____ ,
 Print Motor Carrier's Name Phone Number

1300 Houston Avenue, McAllen, Texas 78501 _____ ,
 Print full Address, City, State and Zip Code of Motor Carrier

Signature of Driver X	Date
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If you wish to request and receive this information by electronic mail, submit a completed and notarized Electronic Mail Verification Form (MCS-32), available at the following web address:
<http://www.dps.texas.gov.htm>