



ALCOHOL/DRUG TEST INFORMATION AND RECORDS RELEASE FORM

I understand and acknowledge that, pursuant to Federal Law (49 C.F.R. Part 382), it is a condition precedent to my qualification to perform safety sensitive functions on behalf of UniGroup, Inc ("UniGroup") for UniGroup to obtain the results of all Department of Transportation (DOT) or other applicable government required drug and alcohol tests (including refusals to be tested) from all companies for which I have provided safety sensitive functions within the preceding three (3) years, whether as an employee, independent contractor or as an employee or contractor of an agent of the previous company, or for whom I took a pre-employment or pre-qualification drug and/or alcohol test during the preceding three (3) years. I hereby authorize UniGroup or the Profile Supervisor at its representative, LexisNexis or HireRight, to obtain from all those companies for which I either provided safety sensitive functions or to which I applied for qualification or employment during the previous three (3) years the following information:

- I. All positive controlled substance (drug) test results during the preceding three (3) years.
- II. All alcohol test results of 0.04 or greater during the preceding three (3) years.
- III. All instances in which I refused to submit to a U.S. Department of Transportation required drug or alcohol test during the preceding three (3) years, (including verified adulterated or substituted drug tests results).
- IV. Any other violations of DOT agency drug and alcohol testing regulation.
- V. Any documentation which may not be in possession of prior employment of contraction company regarding completion of DOT return-to-duty requirements. (49 C.F.R. Part 40)

I AUTHORIZE AND DIRECT all persons having information relative to this investigation to disclose such information to UniGroup. This specifically includes the release of information by my PRESENT AND FORMER CARRIERS OR EMPLOYERS, law enforcement agencies, courts, criminal justice agencies, educational institutions, financial institutions, military services, landlords, credit agencies, creditors or any others, whether or not specifically mentions herein.

I have read, understood, and received a copy of this authorization.

(Signature of Applicant for Qualification)

(Printed name of Applicant for Qualification)

(Date)

Indicate Van Line:

- United Van Lines, LLC
- Mayflower Transit, LLC
- United Mayflower Container Services, LLC