

Clearinghouse Company Enrollment

Every CDL driver is required to register for Clearinghouse, a national database that houses drug and alcohol testing results.

Clearinghouse Enrollment Fee: \$90
Create Driver Account Fee: \$25
Price per Query: \$1.25

Prices for Pulling Queries

1	\$30	6-10	\$100
2-3	\$55	11-20	\$125
4-5	\$75	21+	Please call for pricing

Company Information

COMPANY NAME

COMPANY PRESIDENT (FIRST & LAST NAME)

US DOT NUMBER

US DOT PIN NUMBER

DO YOU HAVE ACCOUNT LOGIN INFORMATION FOR FMCSA?

YES

NO

ARE YOU THE OWNER AND THE ONLY DRIVER?

YES

NO

FMCSA USERNAME

FMCSA PASSWORD

EMAIL ADDRESS

PHONE NUMBER

COMPANY ADDRESS

CITY

STATE

ZIP CODE

Payment Information

CREDIT CARD NUMBER

NAME ON CARD

EXPIRATION DATE

CVC CODE

BILLING ZIP CODE

I hereby authorize TransLab charge the credit card indicated in this authorization form according to the terms outlined here. This payment authorization is for the goods and or services described in the provided invoice, for the amount indicated on it. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form and the invoice that I received.

Clearinghouse Pulling Driver Queries

DRIVER DETAILS ENTER DRIVER INFORMATION BELOW. IF YOU HAVE MORE THAN 3 DRIVERS, DUPLICATE THIS PAGE.

<input type="text"/>	<input type="text"/>	<input type="checkbox"/> FEMALE
FIRST AND LAST NAME	DATE OF BIRTH	<input type="checkbox"/> MALE
<input type="text"/>	<input type="text"/>	
EMAIL ADDRESS	PHONE NUMBER	
<input type="text"/>	<input type="text"/>	
CDL #	CDL STATE OF ISSUANCE	

<input type="text"/>	<input type="text"/>	<input type="checkbox"/> FEMALE
FIRST AND LAST NAME	DATE OF BIRTH	<input type="checkbox"/> MALE
<input type="text"/>	<input type="text"/>	
EMAIL ADDRESS	PHONE NUMBER	
<input type="text"/>	<input type="text"/>	
CDL #	CDL STATE OF ISSUANCE	

<input type="text"/>	<input type="text"/>	<input type="checkbox"/> FEMALE
FIRST AND LAST NAME	DATE OF BIRTH	<input type="checkbox"/> MALE
<input type="text"/>	<input type="text"/>	
EMAIL ADDRESS	PHONE NUMBER	
<input type="text"/>	<input type="text"/>	
CDL #	CDL STATE OF ISSUANCE	