



THE MARITIME CONSORTIUM, INC.
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2025 ENROLLMENT APPLICATION

COMPANY INFORMATION: Please complete all information and sign below.

Company or Vessel Name:

Vessel Documentation Number(s)/Registration Number(s):

Designated Employer Representative (DER):

Address:

City:

State:

Zip:

Phone:

Fax:

E-mail

Company Type:

☐ Charter/Party ☐ Towing/Salvage ☐ Passenger
☐ Sailing School ☐ Other (specify):

Months of Operation: (please check all that apply)

☐ JAN ☐ FEB ☐ MAR ☐ APR ☐ MAY ☐ JUN
☐ JUL ☐ AUG ☐ SEP ☐ OCT ☐ NOV ☐ DEC

MARITIME MEMBER CONTRACT

A. Testing Services

For the term that begins the date this application is received by The Maritime Consortium, Inc. (Maritime), through **December 31, 2025**, Maritime will act as employer's (Member Company) intermediary (as provided in 40.345) and will provide the Member Company: (1) A specimen collection site within thirty miles of Company's registered office, when possible; (2) Overnight express shipment of specimen to be tested at a SAMHSA approved testing laboratory; (3) Laboratory testing utilizing state of the art testing procedures including EMIT screening, GC/MS confirmations, proficiency testing, on-site inspections, adulteration checks, and 72 hour reporting of results; (4) Computer generated random selection of employees by Maritime; (5) Notification of Member Company's Designated Employer Representative will be in writing when employee/contractor is selected for a drug test; (6) Serious Marine Incident (SMI) testing when the available M-Pak kits are obtained and used according to included instruction for required drug and alcohol tests; (7) For cause testing; (8) pre-employment testing available as explained in Section E below; (9) Periodic testing or providing member's proof of exemption to the Coast Guard; (10) Medical Review Officer (MRO) services including verification of test results, chain of custody verification, direct interview of employee/contractor in case of positive tests, and second medical confirmation of positive tests; (11) Recordkeeping of all positive test results for five years, and negative results for one year; (12) Management Information Systems (MIS) reporting to the Coast Guard and a Certificate of a MIS Filing during membership term; (13) Coast Guard notification of failures to test, termination, or positive test results as required by regulation and/or law.

B. Program Documentation

Maritime will provide Member Company: (1) Identification cards for all enrolled Captains and crew. Such cards will be used as proof of the employee's enrollment in random drug testing, and will contain a unique computer generated ID number; (2) A letter confirming Member Company's compliance for use during Coast Guard Audit; (3) Drug-Free Vessel sticker; (4) Access to a password-protected website containing a company drug testing policy, copies of Coast Guard regulations, testing procedures, Employee Assistance Program materials (includes contact information for Substance Abuse Professionals), and employee statement of understanding. Upon request, Maritime will also provide the following at no charge to the member: (1) Replacement ID card; (2) Replacement Certificate of Enrollment; (3) Coast Guard approved letter for license renewal; (4) Coast Guard Audit Package including the USCG Audit form and full listing of prior drug tests performed by Maritime.

C. Guarantee of Compliance

Maritime provides a guarantee that the Maritime's services to the Member Company are in compliance with DOT/Coast Guard drug testing regulations, as contained in 46 CFR parts 4, 5, 16, and 49 CFR part 40. It is understood that should these DOT/Coast Guard drug-testing regulations be changed or modified, Maritime retains the right to adjust fees to take into account any additional costs required by any new regulation.

D. Company Responsibilities

(1) Per Coast Guard regulations, Member Company is responsible for complying with Coast Guard pre-employment testing regulations, as described in section E below; (2) To appoint a Designated Employer Representative (DER) who will be the contact person for test notices, tests results as well as all company correspondence. Notify Maritime in writing when/if DER information changes; (3) To ensure that current mailing address, phone and fax numbers and email address are provided to Maritime and that should secondary (or off-season) contact information be available, that it too be provided to Maritime; (4) Company responsibilities include promptly enrolling new employees; and (5) properly following random testing instructions including taking any test immediately. The Member Company shall indemnify, hold harmless, and defend Maritime against legal actions arising out of or in connection with Company's failure to comply with federal law or policy due to any breach of this agreement.

E. Coast Guard Pre-Employment Test Regulations

As required by 46 CFR part 16, when hiring a new employee or enrolling in a random program for the first time, members must submit to a pre-employment test prior to enrollment in any random testing program. Once a test is performed and an acceptable result is received, all enrollment benefits (see Sections A and B) apply to the new employee for the membership term. Any person joining a drug-testing program must be pre-employment tested upon enrollment to verify drug-free status. Maritime offers this pre-employment test is available for an additional \$60 per test. A person shall be deemed exempt from the pre-employment test if he/she has had a NIDA 5 Chemical Drug Test within 6 months prior to enrollment, or has been subject to random testing for 60 consecutive days within the past 6 months, as per 46 CFR part 16. Maritime can only verify full compliance by having a copy of pre-employment documentation on file for each employee.

By signing below, you acknowledge full understanding of the Maritime Member Contract, and agree to the terms outlined therein.

Signature:

Date:

Company or Vessel Name: _____

ENROLLMENT DESCRIPTION

Purpose: [46 CFR 16.230] Marine employers shall establish programs for random chemical drug testing for all crewmembers performing duties directly related to the safe operation of all company vessels.

Enrollment: Includes the costs of random, reasonable cause and follow-up drug testing for each defined crewmember, regardless of the number of each times tested through the membership term.

Pre-Employment Testing: The Coast Guard requires pre-employment/pre-enrollment testing for any individual joining a drug testing program unless s/he has been tested within the last 6 months or been subject to random testing for 60 consecutive days within the past 6 months. If captains or crewmembers being enrolled are exempt from the pre-employment test requirement, please enclose documentation with this application. Pre-employment testing is available at the time of enrollment for \$60 per test.

LIST OF CAPTAINS, CREWMEMBERS AND DECKHANDS

NAME	SOCIAL SECURITY #	DATE OF BIRTH	LICENSE INFO		PRE-EMPLOYMENT STATUS	
1.	_____	_____	Licensed	Unlicensed	<input type="checkbox"/> Needs Test	<input type="checkbox"/> Exempt
2.	_____	_____	Licensed	Unlicensed	<input type="checkbox"/> Needs Test	<input type="checkbox"/> Exempt
3.	_____	_____	Licensed	Unlicensed	<input type="checkbox"/> Needs Test	<input type="checkbox"/> Exempt
3.	_____	_____	Licensed	Unlicensed	<input type="checkbox"/> Needs Test	<input type="checkbox"/> Exempt
5.	_____	_____	Licensed	Unlicensed	<input type="checkbox"/> Needs Test	<input type="checkbox"/> Exempt
6.	_____	_____	Licensed	Unlicensed	<input type="checkbox"/> Needs Test	<input type="checkbox"/> Exempt
7.	_____	_____	Licensed	Unlicensed	<input type="checkbox"/> Needs Test	<input type="checkbox"/> Exempt
8.	_____	_____	Licensed	Unlicensed	<input type="checkbox"/> Needs Test	<input type="checkbox"/> Exempt
9.	_____	_____	Licensed	Unlicensed	<input type="checkbox"/> Needs Test	<input type="checkbox"/> Exempt
10.	_____	_____				

NOTE: Maritime ID cards will be issued upon receipt of written documentation on pre-employment status. Marine employers operating internationally, please include a "one time" \$100 administrative fee to cover shipping and collection costs.

MARITIME POST-ACCIDENT KITS

The Coast Guard requires each commercial vessel which is more than 2 hours from an open collection site capable of doing alcohol or drug test to have an alcohol test device on board to administer to each person involved in a potential accident, as well as report for a drug test to the closest facility. Section 4-06-1(b) requires that marine employers "take all practicable steps to have each individual engaged or employed on board the vessel who is directly involved in the incident chemically tested for evidence of drug and alcohol use."

Maritime has developed the M-PAK[®] to guarantee full compliance with this new rule. The M-Pak contains:

- The required DOT approved alcohol screening device (ASD) and instructions for its use
- A Federal Chain of Custody (COC) form for the drug test, which includes a full Coast Guard compliant drug test and collection at no fee, the COC is preprinted with your company's information
- Post-accident instructions including Federal Forms from the Coast Guard, including the updated form providing for the alcohol results
- The Coast Guard's requirement for training on the alcohol screening device's use is met with the Maritime Fact Sheet summary
- The M-PAK[®] contains the above referenced in a waterproof and tear-proof envelope uniquely suitable for the marine environment

It is recommended that you maintain one for each of your crewmembers. Please note: If you do not maintain current M-Paks on board your vessel and are involved in a Serious Marine Incident, you will be responsible for all costs associated with post-accident testing.

PAYMENT INFORMATION

Description	QTY	Cost	Amount
New Enrollments (valid through 12/31/2025)		\$75/per person (\$85 AK, HI, PR, VI \$100 GU, MF)	
Pre-Employment Tests Needed		\$60/per test	
M-PAKs (post-accident test kits)		\$20/ per kit	
Extra Vessel Sticker		\$7/each	
Extra Program Handbook		\$15/each	
Employee Assistance Training CD		\$10/each	
Shipping Method (First Class US Mail)		-	
Rush Service (FedEx Priority Overnight) Monday – Friday Delivery: \$55 / Saturday Delivery: \$65 Request MUST be received by 3PM EST and include street address for FedEx delivery.		\$55/\$65	
		TOTAL DUE:	

PAYMENT METHOD

☐ Check (# _____) ☐ Visa/MasterCard ☐ American Express
Card Number: _____ **CVV:** _____ **Exp.** _____
Name on Card: _____
Signature: _____

Three Convenient Ways to Enroll

24-Hour Toll-Free Fax
1-800-764-2350

Online
www.drugfreevessel.com

Mail
The Maritime Consortium, Inc.
PO Box 4070
Annapolis, MD 21403-6070

Please do not mail requests that have been faxed.
Make checks payable to The Maritime Consortium
Credit card payment is required for all online and fax enrollments.