MONTANA DEPARTMENT OF JUSTICE ALCOHOL/DRUG TESTING ADVISORY

Driver Name DL Number		Date of Birth
		CDL Holder: ☐ Yes ☐ No CMV: ☐ Yes ☐ No
1.	Check and	read appropriate action:
		e under arrest for driving or being in actual physical control of a motor vehicle upon ways of this state open to the public while influence of alcohol and/or drugs;
		under arrest for driving or being in actual physical control of a motor vehicle upon ways of this state open to the public under the vith a suspected alcohol concentration of .02 or greater;
		nined there is probable cause to believe you were driving or in actual physical control of a motor vehicle upon the ways of this to the public while under the influence of alcohol (and/or drugs) and was involved in a motor vehicle crash resulting in property
		ined there is probable cause to believe this person was driving or in actual physical control of motor vehicle upon the ways of this to the public and was involved in a motor vehicle crash resulting in serious bodily injury or death;
2.	type of test	w (§ 61-8-1016 and § 61-8-806, MCA) considers you to give consent to test for alcohol or drugs. I have the right to decide the or tests you will be asked to take. I am going to ask you to take a ☐ breath or ☐ blood or ☐ oral fluids test. Later, I may ask a different test.
3.	You do not	have a right to a lawyer under Miranda. You must decide to take or refuse to take the test without talking to a lawyer.
4.	Noncomm	ercial privilege (read under all situations)
	If you refus suspended	e these tests, I will seize any driver license you have and your noncommercial driver license or privilege to drive will be
	If this is you	ur only refusal in the past 5 years, the suspension is for 6 months . If this is your second or subsequent refusal, the suspension r .
5.	Commerci	al privilege (read if the driver holds a CDL or was operating a commercial motor vehicle)
		old a commercial driver license and refuse these tests or if you were driving a commercial motor vehicle and your test results alcohol content of .04 or greater, it is a major offense.
	endorseme	your first major offense, the suspension of your commercial driver license or privilege is 1 year . If you have a hazardous material ent, the suspension of your commercial driver license or privilege to drive is 3 years . If this is your second major offense in your ng history, the suspension of your commercial driver license or privilege is a lifetime suspension .
		ere driving a commercial motor vehicle and you have a measurable or detectable presence of alcohol, you will be declared out- for a period of 24 hours.
6.	Non-Monta	ana Driver License (read if the driver hold a non-Montana driver license)
		ave a driver license issued by another jurisdiction, and you refuse to take the tests, or you were driving a commercial vehicle and sults were .04 or greater, Montana will suspend your driving privileges for the same time periods.
7.		t receive a probationary license while your license is suspended for either refusing to test or if operating a commercial motor test results were .04 or greater.
8.	Your test re	esults or testing refusal may be used as evidence in a criminal trial. At a criminal trial, the jury or judge-in a nonjury trial, may use il to infer that you were under the influence of alcohol and/or drugs. You may rebut this inference at your trial.
9.	for alcohol	ither complete the requested testing or refuse to test, you may have a medical professional administer an independent blood test or drugs. You must pay for any independent tests you want. If you refuse testing now, taking an independent test will not change sion of your driving privileges.
10.		st requires you to blow a proper sample of air into this instrument. It will analyze your breath sample for alcohol concentration.
11.	I am reque	sting a blood test to analyze your blood for alcohol concentration and/or drugs. Will you take a blood test? ☐ Yes ☐ No
12.		sting an oral fluids test to analyze your blood for alcohol concentration and/or drugs te an oral fluids test? ☐Yes ☐ No
This advisory was read to the driver on (date) (time)		
Adv	vising Office	Name:
Adv	vising Office	Signature:
Optional:		
Witness Name:		
Witness Signature:		

36-0200 (04/23)