

ADDENDUM A: SOBERLINK CLIENT AGREEMENT

I, _____, have agreed to participate in the Soberlink program. I agree to comply with all program requirements and acknowledge that I will fulfill each of the conditions set forth below:

I acknowledge that I have received a copy of this Client Agreement and that it was thoroughly explained to me before signing. I understand that I must comply with the requirements of this agreement.

Failure to follow the instructions provided in this Client Agreement may be interpreted as an attempt to conceal alcohol use and may result in action being taken accordingly.

I understand that my failure to comply with this agreement and the instructions I receive from my monitor may be considered a violation of this agreement.

Initial Here **Banned Products:**

_____ I understand that I am not to consume any product containing alcohol. I also agree to wait at least twenty (20) minutes after using mouthwash or any other products containing alcohol, including but not limited to, hand sanitizer, cologne/perfume, hairspray, bug spray, etc. If there are any concerns about certain items that could cause a false positive, I will make sure to ask my monitor before I submit the test. When in doubt, I will not use, consume, or apply anything that might contain alcohol prior to testing.

Initial Here **Tampering:**

_____ I understand that any effort to disable the Soberlink device will be considered a violation of this Agreement. I also understand that if I attempt to disable the Soberlink device, it will be treated as an “attempt to defeat” the equipment and I will be held liable for any damages caused to the device, as well as additional hookup fees if new equipment is required due to intentional damage.

_____ I understand that efforts to cover or obstruct the back vent of the device and/or the view of the camera lens during testing will be viewed as an “attempt to defeat” the equipment.

_____ I understand that any attempt to have another person blow into the device will be considered an “attempt to defeat” the equipment.

_____ I understand that any attempt to introduce artificial or compressed air to the device will be considered an “attempt to defeat” the equipment. Note: The Soberlink device has several tamper detection sensors that will flag tests that are being compromised.

Initial Here **Protecting Equipment:**

_____ I understand that I am to place the Soberlink device in the protective case provided with the equipment at all times when not in use. I also agree to keep the equipment charged so it will function properly.

Current Health Status or Pre-existing Medical Conditions:

_____ I agree that I will reveal my current health status to my monitor and will also notify them of any pre-existing medical conditions that I am aware of such as pregnancy, heart/lung disease, diabetes, or any type of condition that might interfere with a breathalyzer test.

Initial Here **General Instructions:**

_____ I understand that I am not to consume products containing alcohol and over-the-counter medications, such as cough syrups, unless prescribed by a doctor and I have documentation of such prescriptions.

_____ I understand that I need to keep the Soberlink unit charged and in my possession at all times for the duration of the program.

Initial Here **Testing Schedule:**

_____ (optional) I have been provided with a printed Soberlink test schedule. I will take my Soberlink tests within the forty-five minute window of my assigned test times. Tests completed outside of this test time frame will be categorized as “unscheduled.”

Initial Here **Testing Procedures:**

_____ I am responsible for submitting my own breath alcohol tests. Having another person take the test for me would be an attempt to defeat the system. Note: Client photos are reviewed for compliance by either Soberlink’s Adaptive Facial Recognition software or by a monitor.

_____ Eyewear (glasses, sunglasses), hats, or any other items that may distort my appearance will not be worn while testing.

_____ I will not place my hands on the mouthpiece or otherwise obstruct the camera’s view while testing.

_____ I will look directly into the camera lens during the test with eyes open.

_____ I will take the test standing or sitting upright.

_____ I will always use the (provided) Soberlink mouthpiece while testing.

- _____ I will refrain from eating, drinking, or smoking at least twenty (20) minutes prior to testing.
- _____ I understand that non-compliant readings will automatically be transmitted to my monitor via email and/or text.
- _____ If alcohol is detected, I will retest every 30 minutes until my BrAC registers as compliant. Failure to retest as instructed may be considered a “positive” reading and/or may be considered breach of this contract as a “failure to comply”.
- _____ I will take the test in normal operating temperatures (32* - 120* F).
- _____ I will make sure the device’s LCD screen confirms that each test was “Successfully Sent” and will not consider my test as fulfilled unless I receive this confirmation on the device screen.

Initial Here **Equipment Malfunctions:**

- _____ If I encounter problems with the Soberlink device, I will report them immediately to my monitor. If I am unable to speak to my monitor in person or if I call during non-business hours, I agree to leave a message on the voicemail that includes my name, the time, and the nature of my problem.

I acknowledge that I have received a copy of this Contract and that it has been explained to me before signing. I understand that I must comply with the requirements of this Contract until notified otherwise by my monitor. I agree to call immediately if I have any questions about this Contract or if I experience any problems with the mobile handheld unit. I further understand that any violation of this Contract will constitute a violation of the Program and may cause immediate action to be taken.

Client Printed Name

Case No.

Client Signature

Date

Francine Farrell, LMFT, CADC-II
Monitor

Date