## FORM 4

**YUBA-SUTTER TRANSIT AUTHORITY**

**DRUG-FREE WORKPLACE CERTIFICATION**

COMPANY/ORGANIZATION NAME

The contractor named above hereby certifies compliance with Government Code Section 8355 in matters relating to providing a drug-free workplace. The above named contractor will:

* + 1. Publish a statement notifying employees that unlawful manufacture, distribution, dispensation, possession, or use of a controlled substance is prohibited and specifying actions to be taken against employees for violations, as required by Government Code Section 8355 (a).
		2. Establish a Drug-Free Awareness Program as required by Government Code Section 8355 9b), to inform employees about all the following:
			1. The dangers of drug abuse in the workplace,
			2. The person’s or organization’s policy of maintaining a drug-free workplace,
			3. Any available counseling, rehabilitation and employee assistance programs, and
			4. Penalties that may be imposed upon employees for drug abuse violations.
		3. Provide as required by Government Code Section 8355 (c), that every employee who works on the proposed contract:
			1. Will receive a copy of the company’s drug-free policy statement, and
			2. Will agree to abide by the terms of the company’s statement as a condition of employment on the contract.

## CERTIFICATION

I, the official named below, hereby swear that I am duly authorized legally to bind the contractor to the above described certification. I am fully aware that this certification, executed on the date and in the county below, is made under penalty of perjury under the laws of the State of California.

OFFICIAL’S NAME:

DATE EXECUTED:

EXECUTED IN THE COUNTY OF:

CONTRACTOR SIGNATURE:

TITLE: FEDERAL I.D. NUMBER: