

# SCRAM Continuous Alcohol Monitoring® Request Form

Please complete digitally & email to [testing@alphabiolabs.com](mailto:testing@alphabiolabs.com) or complete online [here](#)

**AlphaBiolabs™**

## 1. Request Type

Quote and proceed with case ☐ Quote only ☐

## 2. Participant Details – please provide information on the individual to be monitored

Full Name  Date of Birth  Do not contact directly ☐  
Gender M ☐ F ☐ Email   
Address  Telephone

This address will be used for the fitting and removal of the ankle bracelet.

Are there any special requirements for the fitting and removal appointments (e.g. a chaperone or a translator)? No ☐ Yes ☐ (If yes, we will contact you to discuss)

## 3. Monitoring Period - please specify the required duration of monitoring (in days)

30 ☐ 60 ☐ 90 ☐ 120 ☐ Other

## 4. Reporting of Results - please specify the preferred frequency of summarised reports

Monthly ☐ Weekly ☐

The reports will be sent by email to the Instructing Party.

## 5. Instructing Party

Full Name  Client's Name   
Position  Your Reference   
Organisation  Court Reference   
Address  Filing Date   
Telephone  Filing Time   
Email  Court Date

Is a purchase order number required? No ☐ Yes ☐ If yes, please provide the number

Has the monitoring been court ordered? No ☐ Yes ☐ If yes, please email the relevant section of the court order where available

VAT Registered? No ☐ Yes ☐ If yes, please confirm your VAT registration number

The reports will be sent by email to the Instructing Party.

## 6. Split Invoicing

We invoice monthly for the use of the SCRAM® ankle bracelet, rather than at the the end of the agreed duration.

Please complete this section if the cost is to be shared between multiple parties.

Are any of the parties a litigant in person? No ☐ Yes ☐ (If yes, their fees will be due upfront, prior to any monitoring taking place)

% share to be invoiced to the Instructing Party

Please add details below of other parties to be invoiced, including their respective percentage shares.

To avoid invoice rejection, state the name of each client represented.

Contact Name	<input type="text"/>	Organisation	<input type="text"/>
Address	<input type="text"/>	Telephone	<input type="text"/>
Email	<input type="text"/>	Purchase Order No.	<input type="text"/>
Client Full Name	<input type="text"/>	Reference No.	<input type="text"/>
% share to be invoiced to this additional party	<input type="text"/>	Court Reference No.	<input type="text"/>

Contact Name	<input type="text"/>	Organisation	<input type="text"/>
Address	<input type="text"/>	Telephone	<input type="text"/>
Email	<input type="text"/>	Purchase Order No.	<input type="text"/>
Client Full Name	<input type="text"/>	Reference No.	<input type="text"/>
% share to be invoiced to this additional party	<input type="text"/>	Court Reference No.	<input type="text"/>

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6. Split Invoicing (continued)

Contact Name	<input type="text"/>	Organisation	<input type="text"/>
Address	<input type="text"/>	Telephone	<input type="text"/>
Email	<input type="text"/>	Purchase Order No.	<input type="text"/>
Client Full Name	<input type="text"/>	Reference No.	<input type="text"/>
% share to be invoiced to this additional party	<input type="text"/>	Court Reference No.	<input type="text"/>

7. Additional Comments

8. Privacy Notice and Terms & Conditions

AlphaBiolabs complies with its **privacy notice** in relation to your personal data and that of samples. It expects and requires you to do the same (fulfilling your obligations as data controller in the first instance) to donors and those named for split invoicing. Your agreement to proceed with the order confirms that you indemnify AlphaBiolabs for any failure to fulfil your legal obligations (by failing to inform the data subjects or other third parties of AlphaBiolabs’ involvement and services, and that AlphaBiolabs will contact them).

**Please note** that your agreement to proceed with the order also confirms that you accept AlphaBiolabs’ Terms & Conditions, which can be viewed [here](#)

Thank you for your request. Please email this completed form to [testing@alphabiolabs.com](mailto:testing@alphabiolabs.com)