



Important Instructions for Filling Out the AÜV Form

Please start by entering your full first and last name, date of birth, and contact information. This information is necessary to process your abstinence review procedure.

Please read the following instructions carefully before completing the AÜV form. These guidelines are intended to ensure that all required information is accurately and fully provided, so the abstinence review process can proceed smoothly.

1. Provide Accurate Information

Make sure to fill out all sections of the form precisely and completely. Incomplete or incorrect information may delay the review process.

2. Verify Your Information

Before submitting the form, double-check all your entries for accuracy. Inaccurate information may cause misunderstandings or delays.

3. Include Contact Information

Please provide your current and complete contact details (e.g., phone number, email address) so we can quickly reach you if there are any questions.

4. Use Legible Writing

If you fill out the form by hand, please use clear and legible handwriting. Unreadable entries may result in delays.

5. Meet Submission Deadlines

Pay attention to the established deadlines for submitting the form and the necessary documents. Late submissions may impact the process.



6. Complete Identification Information

Fill out the section on personal identification completely. This includes your name, date of birth, address, and other requested information.

7. Submit Missing Documents

If you do not have all the necessary documents at the time of submission, please contact us to arrange when the missing documents can be submitted.

8. Language Assistance

If you have any language difficulties, please let us know. We can provide the form in different languages. Visit <https://mpuzentrale.com/abstinenzueberpruefungsverfahren-formulare/> to select the language that suits you best.

9. Relevant Documents and Submit

Ensure that all relevant documents, such as medical certificates or test results, are submitted along with the form. It is required that the form and all accompanying documents be sent in a single PDF file to auev@mpu-zentrale.com. Please name the file "AÜV-Formular Firstname_Lastname."

If you have any questions regarding the completion of the form or the documents to be attached, do not hesitate to contact our staff. You can reach us via orgaauev@mpu-zentrale.com or call us at 0800 7239096.

First and last name:

Date of birth:

Questionnaire regarding your abstinence

(If space is insufficient, please use the last blank page for additional information.)

1. When were you noticed in traffic with alcohol and/or drugs? Please provide the date and time. If there were multiple incidents, please list all dates.
2. What substance were you noticed with? Please specify the substance (alcohol and/or drugs). For drugs, please list the specific drugs (such as cannabis, cocaine, heroin, ecstasy, amphetamine, ketamine, or similar).
3. What values were measured at the incident? Please provide the measured blood alcohol concentration (in per mille) with the time of blood sampling for alcohol, and for drugs, all measured values in nanograms (ng).
4. How much alcohol/drugs did you consume on the day of the incident? Please specify the quantity and the period of consumption (from when to when?). For alcohol, also specify the type of alcohol (such as beer, wine, spirits, cocktails, or similar) and the size of glasses/bottles in milliliters.



Please make sure to note down the point to which you add the information.