

HEALTH DECLARATION – SITE VISITORS COVID-19 DILIGENCE

Access to **Proquip Solutions Ltd.**, only permitted on emailing this completed health declaration to:

sales@proquipx.com

l,	, decla	re I have:
	(Name)	
1.	NOT been outside of New Zealand in the past 14 days and I am not a suspecarrier of COVID-19.	ected / confirmed
2.	NOT had contact with someone, (<i>example</i> : family, friends, shared lodgers, have recently been outside of New Zealand.	workers), who
3.	NOT presented with flu-like symptoms recently, (example: No signs of illness including fever dry cough and breathing difficulty).	
Date: _		
Time: _		
Full Na	ıme:	
Signed	l:	
Busine	ess Name:	