**SELF DECLARATION FORM**

(To be submitted on arrival at the airport)

|  |  |
| --- | --- |
| Name |  |
| Date of Arrival |  |
| Arriving From |  |
| Local Address  |  |
| Mobile No. |  |
| E-Mail Address |  |

I hereby declare that:

1. I have not tested COVID-19 positive in the last two months.
2. I am not suffering from any cough/fever/respiratory distress.
3. If I develop any of the symptoms mentioned in point 2 above, I will contact the local health authorities without any delay.
4. I will make my mobile number/ contact details available to the local authorities for contact tracing if required by them.
5. I undertake to strictly adhere to the protocols as prescribed by the health authorities for Home Quarantine without any deviation.
6. I understand that furnishing incorrect information would make me liable to penal action.

Place: Signature

Date: