

## COVID-19 DECLARATION

Throughout the COVID-19 situation our top priority is to ensure the health and wellbeing of our employees, contractors and stakeholders while continuing to deliver for our customers. As the COVID-19 outbreak continues to evolve Port Waratah is monitoring the situation closely and following all guidance provided by the Australian and NSW Government and SafeWork Australia.

To prevent the spread of COVID-19 and reduce the potential risk of exposure to our workforce, we are conducting a simple screening questionnaire. Your participation is important to help us take precautionary measures to protect you and everyone working at Port Waratah. All visitors are required to complete this declaration.

<b>Name:</b>	<b>Personal Phone Number:</b>
<b>Company / Organisation:</b>	<b>Port Waratah Host/Supervisor:</b>
<b>Date of Attendance:</b>	<b>Residential Address:</b>
<b>Reason for Attendance:</b>	

<p><b>Self-Declaration by Individual</b></p> <p><i>To be completed and provided to Security 24 hours prior to planned visit.</i></p>
<p>Have you experienced any cold or flu-like symptoms in the last 14 days (to include fever, cough, sore throat, respiratory illness, difficulty breathing)?</p> <p><input type="checkbox"/> <b>YES</b>    <input type="checkbox"/> <b>NO</b></p>
<p>Have you been in <u>close contact</u> with a confirmed case of COVID-19 (either in the community or at work) or have been identified as a or a <u>casual contact</u> as defined by NSW Health and are awaiting COVID-19 test results or serving an isolation period?</p> <p><input type="checkbox"/> <b>YES</b>    <input type="checkbox"/> <b>NO</b></p>
<p>Have you attended any of the <u>COVID-19 case locations</u>, transmission venues of concern, public transport, flights with confirmed COVID-19 cases or interstate case locations listed on the NSW Government website within the last 14 days?</p> <p><input type="checkbox"/> <b>YES</b>    <input type="checkbox"/> <b>NO</b></p>
<p>Are you vaccinated with an approved COVID-19 Vaccination?</p> <p><input type="checkbox"/> <b>YES (first dose only)</b>    <input type="checkbox"/> <b>YES (fully vaccinated)</b>    <input type="checkbox"/> <b>NO</b></p> <p><i>If "yes" you must provide evidence of your vaccination</i></p>

**If you select any of the "underlined" answers approval is required from the Department Manager or Delegate**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

<b>Access Status:</b>	<input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED
<b>Port Waratah Manager(s):</b>	
<b>Signature:</b>	
<b>Date:</b>	

Please provide a copy of this signed form on presentation to the Port Waratah Security prior to entry.