

COVID-19 Declaration (V8)



All persons wishing to enter the SELX premises are required to scan in using the Service NSW App or complete this declaration. Failure to scan in or complete and sign this declaration will result in you being refused access.

You are NOT permitted to enter SELX if it contravenes any State or Federal travel restrictions, border closures and/or any State or Federal public health orders relating to COVID-19.

If you answer YES to any of the questions below, you must verbally declare it to the gate attendee.

Your personal health

- | | |
|---|----------|
| 1. Have you been tested for COVID-19 and are still waiting for results? | YES / NO |
| 2. In the last 72 hours have you experienced flu like symptoms or are you currently feeling unwell? | YES / NO |

Your close contacts

- | | |
|---|----------|
| 3. In the last 14 days have you been in contact with any person who has an active COVID-19 diagnosis or has been tested for COVID-19 and are waiting for results? | YES / NO |
|---|----------|

Tick the purpose for your attendance at SELX today:

A buyer with <u>genuine intent to buy</u> and who will not contravene any State or Federal travel restrictions, border closures or any public health orders relating to COVID-19 hotspots by my attendance.	
SELX employee / contractor	SELX agent employee / contractor
Transport driver / drover / contractor	LLS, MLA, Police, Media

Declaration

I, the undersigned, do hereby declare:

- That I have read and understood the above questions and answered them truthfully and to the best of my knowledge.
- That whilst I am on the SELX site:
 - I shall wear a face mask at all times both indoors and outdoors.
 - I shall where possible, maintain at least 1.5 metre distance from others.
 - I will not shake hands and always maintain proper hygiene including regular handwashing.
 - I agree to comply with any on-site directions.
- I will complete my business on site as quickly and efficiently as possible and then vacate the site.

[print your full name]

Address: _____ TOWN _____
[print your address]

Phone No: _____

Signature

Date: / / 2021