SELF-DECLARATION PURSUANT TO ART. 46 AND 47 Presidential Decree No. 445/2000

(COVID-19 DECLARATION)

The undersigned (Surname and Name)		
Born on/In		(City and Country)
Identification document	nn.	date
Phone		
aware of the consequences foreseen in case of false declar	arations to a public official (art.49	5 C.P.)
DECLARES UN	NDER ITS OWN RESPONSIBILITY	
Hasn't had close contact with a COVID patient in	the past 10 days;	
 Has not had close contact with one or more peo- last 10 days; 	pple with fever and / or respirator	y symptoms (home, office, work) in the
 Not to be currently positive for Covid-19 and no measure; 	t having been subjected to the las	t 10 days fiduciary or quarantine isolation
Which does not have any of the following symptoms:		
 fever and / or widespread muscle aches; 		
• upper and lower respiratory tract symptoms: co	ugh, sore throat, breathing difficu	lties;
• gastrointestinal symptoms (diarrhea, nausea, etc	c.)	
disturbances in the perception of smells and tast	tes (anosmia, dysgeusia).	
The undersigned also declares to be aware that the per one's own health and that of all other people; therefore referred to in the rules on containment and management	e it lends its explicit and free cor	sent to their treatment for the purposes
The undersigned consents to the processing of personal of	data contained in this declaration.	
Place and date		
	Signature	
[In the case of a minor, fill in the following part by the pe		_
Surname and Name		
Born on/In		
Identification document		uate
Phone		
Place and date	c	
	Signature	

Note

The above information will be processed in accordance with EU Regulation no. 2016/679 (Regulation general on the protection of personal data) for the purposes of prevention from Covid-19 referred to in the information provided to pursuant to art. 13 of the aforementioned Regulation.