

## EXTERNAL PERSONS' SELF-DISCLOSURE FORM

### SAFETY QUESTIONS DUE TO THE SPREAD OF COVID-19

Location	
My TransnetBW contact (on construction sites: site supervisor)	
The visit to TransnetBW is necessary.	<hr/> Signature of TransnetBW contact or construction site supervisor

Company:	
Surname / First name:	
Home address:	
E-mail:	
Phone / Mobile phone:	
Place / Date / Signature	
Vaccinated, recovered, or tested:	yes                      no <i>Valid certification of vaccination or recovery or negative test must be carried at all times.</i>

I agree for this **document to be kept on file** for five months. The document will be destroyed five months after the end of this visit.

*Please note: Make sure you fill out this form in full, including the next two pages. Please hand in the completed form at reception or the site supervisor's office.*

**I hereby declare that I**

(please tick the relevant boxes, more than one selection possible!)

	<p>that I do <b>not</b> to my knowledge am infected with coronavirus, <b>and</b></p> <p>that I do <b>not</b> currently show any typical symptoms of a COVID-19 infection, such as a high temperature, dry cough or a loss of sense of taste or smell, <b>and</b></p> <p>that I am <b>not</b> currently obliged to <b>self-isolate</b> (quarantine) under government guidelines<sup>2</sup></p>
	<p>that I have <b>not</b> knowingly had any direct <b>contact</b> with persons in the past 10 days who</p> <ul style="list-style-type: none"> <li>/ tested <b>positive</b> for coronavirus, <b>or</b></li> <li>/ that I do <b>not</b> currently show any typical <b>symptoms</b> of a COVID-19 infection, such as a high temperature, dry cough or a loss of sense of taste or smell.</li> </ul> <p><b>OR:</b></p> <p>that although I have been in direct <b>contact</b> with persons in the past 10 days who</p> <ul style="list-style-type: none"> <li>/ tested <b>positive</b> for coronavirus <b>or</b></li> <li>/ showed typical <b>symptoms</b> of a COVID-19 infection, such as a high temperature, dry cough or a loss of sense of taste or smell,</li> </ul> <p>I am <b>not (no longer)</b> obliged to <b>self-isolate</b> (quarantine) under government guidelines.</p>
	<p>that I am familiar with the relevant <b>federal state regulation for this location for persons arriving in Germany from risk areas</b><sup>3</sup> and that I am complying with this regulation. This includes that I am <b>not</b> subject to any <b>self-isolation</b> (quarantine) rules due to a stay in a risk area.</p>

<sup>2</sup> e.g. for Baden-Württemberg: The current version of Verordnung des Sozialministeriums zur Absonderung von mit dem Virus SARS-CoV-2 infizierten oder krankheitsverdächtigen Personen und deren haushaltsangehörigen Personen (Corona-Verordnung Absonderung – CoronaVO Absonderung) (available in German only) from 14/12/2021 and for Bavaria: The current version of Allgemeinverfügung Quarantäne von Kontaktpersonen und von Verdachtspersonen, Isolation von positiv auf das Coronavirus SARS-CoV-2 getesteten Personen (AV Isolation) from 31/08/2021 in its current version (available in German only).

<sup>3</sup> This includes the Ordinance on Coronavirus Entry Regulations (Coronavirus-Einreiseverordnung – CoronaEinreiseV) from 29/09/2021 in its current version as well as all applicable state legislation and regulations in the individual federal states.

**For the period of my activity at this TransnetBW location**, I will be obliged to keep this self-disclosure form updated and **immediately fill out a new self-disclosure form to notify TransnetBW of any changes to my status**. I will remain informed of the latest relevant federal state regulations for this location concerning the fight against coronavirus.

In addition, should I **no longer be present at this location**, I undertake to inform **my contact person (in the case of construction sites: the site supervisor) at TransnetBW** on my own initiative should I **become ill with COVID-19** within 10 days after the end of my visit.

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Place, date

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Signature