

SELF-DECLARATION MADE PURSUANT TO ART. 46 AND 47 D.P.R. 445/2000

IN CASE OF ENTRY INTO ITALY FROM ABROAD

(to be delivered to the carrier on boarding)

The undersigned (surname name) _____, born on ____/____/____, in _____, residence (city, address) _____, living in (city, address) _____, aware of the criminal sanctions provided for in the case of false declarations and the formation or use of false acts, as well as the sanctions provided for in Article 4 of legislative law of 25 March 2020, n. 19,

DECLARES UNDER ITS OWN RESPONSIBILITY

- a) to be aware of the measures to contain covid-19 contagion in force in Italy and, in particular, of the requirements provided for by the **D.P.C.M. of December 3, 2020 and the decrees of the Minister of Health related;**
- b) to be aware of the sanctions provided for in art. 4 of d.l. 25/3/2020, n. 19, converted into L. 22/5/2020 n. 35;
- c) **not to be subjected to the measure of quarantine and not to have tested positive for Covid-19;**
- d) to be returning to Italy **from the following foreign location** _____, by the **following means of transport** (in case of private vehicle indicate vehicle type and license plate; in case of public transport flight details / rail or road race / sea route): _____;
- e) that the move is determined by **reasons of health, work, study, absolute urgency, return to your home, to belong to one of the categories provided for by art. 6(1)(f), (g), (h) or (i) reaching the domicile, home or residence of a person referred to in (f) and (h) with whom there is a proven and stable emotional relationship (indicate in a specific, concrete and verifiable way the reasons for the move and their urgency and necessity):** _____

- f) PERIOD FROM 10 to 20 DECEMBER 2020 - to be coming from or in transit from the countries and territories listed in List C of Annex 20, or:
Austria, Belgium, Bulgaria, Cyprus, Croatia, Denmark (including Faer Oer Islands and Greenland), **Estonia, Finland, France** (including Guadeloupe, Martinique, Guyana, Réunion, Mayotte, and excluding other territories located outside the European continent), **Germany, Greece, Ireland, Latvia, Lithuania, Luxembourg, Malta, Netherlands** (excluding territories outside the European continent), **Poland, Portugal** (including the Azores and Madeira), **the Czech Republic, Romania, Slovakia, Slovenia, Spain** (including territories on the African continent), **Sweden, Hungary, the United Kingdom of Great Britain and Northern Ireland** (including Channel Islands, Gibraltar, Isle of Man and British bases on the Island of Cyprus and excluding territories outside the European continent for which the Kingdom is responsible for international relations), **Iceland, Norway, Liechtenstein, Switzerland, Andorra and the Principality of Monaco;**
 - **To be aware that entering Italy without quarantine (14 days self isolation period) requires a negative molecular/antigen test carried out in the 48h prior to entry into Italy.**

In that regard DECLARES :

- To possess a covid-19 molecular/antigen test with negative outcome carried out in the 48h prior to entry into Italy;
- To carry out the expected 14 days period of health surveillance and trust isolation

- g) PERIOD FROM 21/12/2020 TO 06/01/2021 – to be from countries listed in **List C**, entering Italy for reasons other than those mentioned above (referred to in Art. 6, paragraph 1, of the D.P.C.M. 3 December 2020), and that, therefore, the period of health surveillance / trust isolation (14 days) at the indicated domicile/residence/dwelling must be observed;
- h) PERIOD FROM 21/12/2020 TO 06/01/2021 – to be from countries listed in **List C**, having stayed or transited for one or more days in those countries and territories for reasons other than those indicated in art. 6, paragraph 1, of the aforementioned D.P.C.M., and that, therefore, the period of health surveillance /trust isolation (14 days) at the indicated domicile/residence/dwelling must be observed;
- i) PERIOD FROM 21/12/2020 TO 06/01/2021 – to be from countries listed in **List C**, to enter Italy for the reasons included among those of art. 6, paragraph 1, of the D.P.C.M. of 3/12/2020, and to be aware of the possibility of not having to carry out the expected 14-day trust isolation period if, in the 48 hours prior to arrival in Italy, the swab was carried out by molecular/antigenic test with negative results;
- j) PERIOD FROM 10/12/2020 TO 15/01/2021 – to be from countries listed in **List D (Australia, Japan, New Zealand, Republic of Korea, Rwanda, Singapore, Thailand, Uruguay)**, and that, therefore, the period of health surveillance/trust isolation (14 days) at the indicated domicile/residence/dwelling should be observed;
- k) PERIOD FROM 10/12/2020 TO 15/01/2021 – to be from countries listed in **List E (i.e. all other states not mentioned in the aforementioned lists)** in the 14 days prior to entry into Italy, to enter for the reasons included among those of art. 6, paragraph 1, of the D.P.C.M. of 3/12/2020 and to be aware that you will have to observe the period of health surveillance / trust isolation (14 days) at the indicated domicile/residence/dwelling;
- l) to be aware that the categories of persons provided for in art. 8 paragraph 8 of the D.P.C.M. of 03/12/2020 are exempt from the obligation of swab (antigenic or molecular test) and fiduciary isolation;
- m) to be aware of the obligation to submit to the carrier a certificate that, in the 48 hours prior to entry, he has undergone a molecular or antigenic test, carried out by means of a swab and a negative result;
- n) that if you come from or have stayed in the fourteen days prior to entry into Italy in one or more States or territories listed in Lists C, D and E of Annex 20, even asymptomatic, they are obliged to immediately notify the Department of Prevention of the health company competent for the territory;
- o) to be aware that in the event of the onset of Covid-19 symptoms, the obligation remains imposed on anyone to report this situation promptly to the Health Authority and to undergo isolation, in the afterage of the consequent determinations of the health authority;

- that in relation to the above requirements, in the cases expressly provided for, will carry out the expected 14-day period of **health surveillance and trust isolation in the home/dwelling located at the following address:**
square/street _____ n. _____
internal _____ Common _____ (_____)
ZIP code _____ at: _____
that, once arrived in Italy, will reach directly and in the shortest possible time, the address indicated in the previous point through the following **private or own means:** _____

- that **the telephone contact** details from which to receive communications during the entire period of health surveillance and trust isolation are as follows: fixed: _____
mobile: _____.

Location, date, and time of this declaration _____

Declaration signature

for the Carrier