

Visitors & Contractors Declaration

Due to the ongoing situation with Coronavirus (COVID-19), we are requiring all visitors to fill-out the declaration form below. We will then make a decision on access to the site based on the answers provided.

Each visitor must complete this form no more than 24 hours prior to their visit. Please send it back to your Channel Commercials PLC (CCPLC) contact. You will then be asked to confirm there has been no change to your circumstances on arrival.

First Name:			
Surname:			
Company Name:			
Company Contact Details:			
Arrival Date at CCPLC:			
Contact Person at CCPLC:			
Do you currently have any of the following symptoms?:		Please tick	
High Temperature (37.8 degrees or higher, or hot to touch on chest /back)		□Yes	□ No
A new, continuous cough (cou coughing episodes in 24 hours	ughing a lot for more than an hour, or 3 or more s)	□Yes	□ No
A loss of, or change in, your normal sense of taste or smell		□Yes	□ No
2. Have you had any of the above symptoms in the last 7 days?		□Yes	□ No
3. Has a member of your household had any of these symptoms in the last 14 days?		□Yes	□ No
days? Please provide any other relevant		site if vo	u and al
days? Please provide any other relevant f you have answered "Yes" to an members of your household hav	ny of the above then we can only allow you on re tested negative for Coronavirus since the si		
days? Please provide any other relevant If you have answered "Yes" to an members of your household have 4. To your knowledge, in the last anyone with these symptoms,	ny of the above then we can only allow you on re tested negative for Coronavirus since the si t 14 days have you been in close contact with or who may have Coronavirus (COVID-19)?		
days? Please provide any other relevant If you have answered "Yes" to any other relevant 4. To your knowledge, in the last anyone with these symptoms, 5. In the last 14 days have you b	ny of the above then we can only allow you on re tested negative for Coronavirus since the si	tuation o	ccurred
days? Please provide any other relevant If you have answered "Yes" to any other sof your household have 4. To your knowledge, in the last anyone with these symptoms, 5. In the last 14 days have you be Scheme to say you may have some to say you may have you have completed a 14 days seresult).	ny of the above then we can only allow you on the tested negative for Coronavirus since the sinc	□Yes □Yes v you oned a nega	□ No □ No site unti
days? Please provide any other relevant If you have answered "Yes" to any members of your household hav 4. To your knowledge, in the last anyone with these symptoms, 5. In the last 14 days have you by Scheme to say you may have answered "Yes" to complete a 14 days seresult).	ny of the above then we can only allow you on the tested negative for Coronavirus since the sint 14 days have you been in close contact with or who may have Coronavirus (COVID-19)? The energy contacted by the NHS "Test & Trace" been in contact with a confirmed case?	□Yes □Yes v you oned a nega	□ No □ No site untilitive test
days? Please provide any other relevant f you have answered "Yes" to an members of your household hav 4. To your knowledge, in the last anyone with these symptoms, 5. In the last 14 days have you b Scheme to say you may have f you have answered "Yes" to or you have completed a 14 days sesult). Please contact us to discuss and rechanges to the above information	ny of the above then we can only allow you on the tested negative for Coronavirus since the sinc	□Yes □Yes v you one ed a nega your coop If there ly to the	□ No □ No site untilitive test

Data Protection notice: We are collecting and processing this personal data in line with relevant Data Protection Legislation. The information is necessary in order to meet our legal Health & Safety obligations and to protect against serious threats to health. We do this as preventive measures to mitigate the risk of a Coronavirus (COVID-19) outbreak at our site. This data sheet will be stored by our HR department and will not be shared with any third party, unless there will be an official request by the local authorities for reasons of public interest in the area of public health. The datasheet will be deleted one month after collection, unless a longer period is required by the public authorities.