



COVID-19 NOTICE: DECLARATION FORM

The following information is required to be submitted by every Contractor and Visitor, prior to access to our facilities.

To help prevent the spread of COVID-19 and reduce the potential risk of exposure, we are conducting a simple screening declaration form. Your participation is important to help us take precautionary measures to protect you and our employees.

Visitors and contractors must read the information below and sign to confirm they understand the COVID-19 information given and will comply with these whilst on Company premises.

I hereby certify that I have not within the last 14 days;

- Tested positive or am presumptively positive with the Coronavirus or been identified as a potential carrier.
- Experienced any symptoms commonly associated with the Coronavirus such as fever, persistent cough or shortness of breath.
- Been in any location designated as a risk by the Government or Public Health England.
- Been in direct contact with or in the immediate vicinity of any person been identified as a carrier or potential carrier of the Coronavirus.

I will consent to having my temperature taken by a member of Hadleigh Castings staff prior to entrance to the site and facilities. I acknowledge and accept that this declaration will be considered as my consent to record and store this declaration for the purpose of ensuring the safety of all persons that may encounter me during my visit. It will be retained in hard copy format at the point of collection and will only be accessed by authorised employees. We will only retain this information for as long as it remains relevant and for a maximum of six months.

Signature: Date:

Visitors Organisation: Contact No:

Date of Visit..... Arrival Time:..... Departure Time:.....

Temperature..... Recorded by:.....

Member(s) of HCL staff you are visiting:
.....

Thank you for your patience.