

COVID-19 DECLARATION REAL ESTATE AGENCY

Name of the real estate agency: _

Address of the agency office where the meeting will take place: ____

Name of agency executive officer, real estate broker or employee attending the meeting: _

This declaration is for anyone wishing to visit or have access to an agency office. Once completed, this declaration form must be sent to the agency or submitted to the agency executive officer, real estate broker or agency employee, as the case may be. It will be kept on the agency's record.

If you answer "yes" to one of the following four questions, you will not be able to access the agency's premises and the steps can then be taken using technological tools.

In addition, you undertake to comply with the instructions that will be given to you by the agency executive officer, real estate broker or agency employee attending the meeting. Be aware that any failure to comply with these instructions will result in an immediate interruption of the meeting. The agency executive officer, the real estate broker or employee could ask you to leave the premises.

1. Have you travelled outside of Canada in the past 14 days?

Yes No

- Have you been in contact inside (in a closed area, without the mask being worn by one of the persons), in the past 5 days (10 days for people who are not fully vaccinated), with a person infected with COVID-19?
 Yes
 No
- Have you had cold or flu symptoms in the past 10 days?
 (Fever, cough, sore throat, difficulty breathing, sudden loss of smell)
 Yes
 No
- 4. Have you tested positive for COVID-19 within the past 5 days (10 days for people who are not fully vaccinated)?

Yes	No		
Last name and fir	st name:	 	
Address:		Telephone:	
Signed in:		 on:	

Checking this box replaces your signature and confirms that the information contained in this form is valid.