

Regarding the COVID-19 pandemic, announced by the World Health Organization

I,

Mr./Mrs.

.....

(Name of the passenger)

DECLARE THAT:

1. I don't have symptoms of COVID-19.
2. I am not under quarantine.
3. I am familiar with the epidemiological situation in the Republic of Bulgaria, as well as with the risks of the COVID-19 disease.
4. I will obey the anti-epidemic measures issued by the Minister of Health's orders on the territory of the Republic of Bulgaria.
5. I travel at my own risk.
6. Purpose of the trip:
7. I am obligated to leave the territory of the Republic of Bulgaria immediately.
/applies only to passengers transiting the territory of the Republic of Bulgaria/
8. I bear responsibility for providing false or misleading information under the legislation of the Republic of Bulgaria.

Contact details:

ID/Passport №:

Phone №:

E-mail:

DATE:

SIGNATURE: