

FORMAL STATEMENT TO THE PURPOSE OF ENTRY IN ITALY

In order to counter the spread of COVID-19 epidemic, the Decree of the President of the Council of Ministers issued on 07.09.2020 as well as the Minister of Health Ordinances of 12 August 2020, 21 September 2020 and 07 October 2020, with regard to entry into Italy, have established that:

All natural persons who in the 14 days prior to the entry into Italy, have stayed or passed through into states or territories referred to in C, D, E and F lists, Annex C, even if asymptomatic, are obliged to immediately communicate their entry in Italy to the Department of prevention at the competent local health unit (ASL) of the entrance district, and are subject to health surveillance and fiduciary isolation for a period of fourteen (14) days at their dwell or house as specified in this statement. In case of COVID-19 symptoms onset, it is mandatory to report this situation immediately to the Health Authority through the pertinent telephone numbers;

- If it is not possible to reach dwell, house or residence indicated as the place where the surveillance period or fiduciary isolations should take place, natural persons must communicate it to the local health authority, which informs immediately the Regional Civil Protection that, in coordination with the Department of Civil Protection of the Presidency of the Council of Ministers, determine how and where to carry out surveillance health care and fiduciary isolation, with expenses borne exclusively by people subjected to the aforementioned measures;
 - **in derogation from the provisions of the previous point, exclusively for proven working needs, absolute urgency or situations of necessity, health reasons and for a maximum time not exceeding 120 hours;** natural persons entering Italy, are obliged to immediately communicate their entry in Italy to the Department of prevention at the competent local health unit (ASL) of the entrance district and must submit a formal statement to the air company upon boarding, pursuant to Law art. 46, 47 of the Decree of the President of the Republic December 28, 2000, n. 445, specifying in detail what the proven reason and duration of the permanence in Italy; dwell, house or residence address in Italy; private vehicle used to go from the place of landing/arrival to the above mentioned address; telephone (eventually mobile) number to receive communications during the permanence in Italy. At the end of such mentioned period, it is mandatory to leave Italian territory, otherwise sanitary surveillance and fiduciary isolation must start and last for the next 14 days at the address declared, and in the event of COVID-19 symptoms' onset, it is also obligatory to report this situation immediately to the Department of prevention at the competent local health unit (ASL) through the pertinent telephone numbers and start fiduciary isolation while health authorities are taking actions for the specific case;
 - in case of land transport, transit in the Italian territory is authorized, also to the purpose of going to another State (EU or non-EU), by private or personal vehicle, with the obligation to immediately communicate the entry in Italy to the Department of prevention at the competent local health unit (ASL) relative to the entrance district, and, in the case of onset of COVID-19 symptoms, to report this situation promptly to the Health Authority through the telephone numbers specifically dedicated. The maximum period of stay in Italy is 36 hours. In case of exceeding of this period of stay, it is mandatory to communicate and submit health surveillance and fiduciary isolation.
 - in case of air transport, passengers in transit with final destination in other EU or non-EU country are required to communicate to the air company the reasons for the travel and length of stay in Italy, the last destination together with the identification code of the ticket and the vehicle used at such purpose, as well as a phone (eventually mobile) number. In the event of COVID-19 symptoms onset, it is mandatory to report it immediately to the Department of prevention at the competent local health unit (ASL) through the pertinent telephone numbers and to submit isolation as for the measures provided. The aforementioned passengers in any case must not move away from the airport areas specifically intended for them;
 - The aforementioned provisions do not apply to:
 - a) crew and travel staff;
 - b) traveling employees;
 - c) to citizens and residents of the countries referred to in the A, B, C, D lists, Annex C who enter Italy for proven work reasons, except those who in the previous 14 days have stayed or passed through the countries referred to in C and F list, Annex C;
 - d) health care personnel entering Italy to practice professional healthcare, including the temporary practice pursuant to Law art. 13 D.L. 17.03.2020, n. 18;
- d-bis) to entrance for non-deferrable reasons, including participation in sporting events and exhibitions at international level, subject to authorization by the Ministry of Health and with the obligation to present to the carrier upon boarding, and to anyone appointed to control procedures, the certification of having undergone, in the 72 hours prior to entry into Italy, a molecular or antigen test, carried out by means of a swab having negative result;
- e) cross-border workers entering and leaving the national territory for proven work reasons and the consequent return to their dwell, house or residence;
 - f) staff of companies with registered or secondary offices in Italy who travels abroad with proven working needs that doesn't exceed 120 hours;
 - g) movements to and from the Republic of San Marino or the Vatican City State (A lists, Annex C);
 - h) officials and agents of the European Union or international organizations, to diplomatic agents, to diplomatic administrative and technical staff, to consular officials and agents, military personnel and personnel of Polizia di Stato;
 - i) pupils and students who attend a study course in a State other than that of residence, home or dwell, to which they return every day or at least once a week.
- In any case it is allowed:
 - a. The entry into the national territory of citizens of the States referred to in art. 4, paragraph 1 letter f), of the above mentioned D.P.C.M. issued on 07 August 2020 and their family members as provided for by art. 2 and 3 of Directive 2004/38 / EC.
 - b. The entry into the national territory of third-country nationals residing for a long period according to Directive 2003/109 / EC as well as third-country nationals who have the right of residence from other European provisions or national legislation as well as their respective family members;
 - c. the entry into the national territory of third-country nationals residing in the countries referred to in list D, annex C, DPCM 07.09.2020;
 - Upon entry into Italy from the countries referred to in the C, D, E and F lists, Annex C of the D.P.C.M. issued on 07.09.2020, the obligation of health surveillance and fiduciary isolation applies in the manner referred to in Article 6 of the abovementioned D.P.C.M as for the modification by art. 1, c. 1, let. c..

- Those who intend to enter Italian territory and who have stayed or transited in **Belgium, France, Netherlands, United Kingdom of Great Britain and Northern Ireland, Czech Republic e Spain**, for purposes other than those indicated in art. 6 paragraphs 6 and 7 of D.P.C.M. 7 august 2020 in the previous fourteen days are obliged to either:
- a) show to the carrier during boarding and to anyone in charge of control, certification that states to having undergone, in the 72 hours prior to entering the national territory, a molecular or antigen test, by means of a swab with a negative result;
- b) or undergo molecular or antigen tests, by means of a swab, upon arrival at the airport, if possible, or within 48 hours of entering the national territory, at the local health unit, with the obligation of fiduciary isolation at home or dwelling while waiting to undergo the test.

FORMAL STATEMENT PURSUANT TO LAW DPR N. 445/2000 ART. 46, 47

Being aware of the aforementioned information, the undersigned (surname name) _____, born on ____/____/____, in _____ residence (city, address) _____, living in (city, address) _____, identification document and number _____ - _____, issued by _____, on ____/____/____, phone number _____, and also aware of criminal consequences in case of false information given to a Police Officer as provided by Criminal Law (art. 495 C.P.)

HEREBY DECLARES UNDER ITS OWN LIABILITY

- to be not subjected to quarantine measures and to have not tested positive for COVID-19 virus (*except when the movements are provided by health Authorities*);
- the movement started from (address) _____ and the destination address is _____;
- to have knowledge of the current contagion containment measures, and not to have stayed or transited in the 14 days prior to entry into Italy in Armenia, Bahrain, Bangladesh, Bosnia and Herzegovina, Brazil, Chile, Kosovo, Kuwait, Macedonia Northern, Moldova, Montenegro, Oman, Panama, Peru, Dominican Rep., Colombia and Romania.
- to be aware of the sanctions provided for by D.L. n. 19, 23.03.2020, art. 4, law n°35 22.05.2020;
- I declare to be:
 - coming or in transit from Belgium, France, Netherlands, United Kingdom of Great Britain and Northern Ireland, Czech Republic and Spain and negative for the molecular / antigen test already carried out by means of a swab in the 72 hours prior to entering Italy;
 - coming from or in transit from Belgium, France, Netherlands, United Kingdom of Great Britain and Northern Ireland, Czech Republic and Spain and that I'll carry out the molecular / antigen test by means of a swab within 48 hours of entering Italy and, while waiting for this test, to be carried out at the local health unit, undergoing fiduciary isolation at the residence / dwelling located in _____
- that the movement is due to:
 - working needs;
 - absolute urgency;
 - health needs;
 - study needs;
 - returning home, residence or usual dwelling place;
 - family of residents of E.U., of signatory countries of the Schengen Agreement, of Andorra, of Principality of Monaco, of Republic of San Marino, of Vatican City State, of Great Britain and Northern Ireland UE and third-country nationals residing for a long period according to Directive 2003/109 / EC or of those who derive the right of residence from other European provisions or from National legislation.
 - entry to join a person to his/her domicile / home / residence as referred to in letters f) and h) of art. 4 co. 1 D.P.C.M. 7 August 2020, even if not cohabiting, with whom there is a proven and stable affectionate relationship.

In this regard, the undersigned declares _____

Check Date, Time and Place _____

DECLARANT

POLICE OFFICER

SELF-DECLARATION PURSUANT TO ART. 46 AND 47 D.P.R. No. 445/2000

I, the undersigned _____
born on _____. _____. _____. In _____ (_____),
resident in _____ (_____) Street _____
domiciled in _____ (_____) Street _____
identified by document _____ Nr. _____
Released by _____ on _____. _____. _____.
Phone number _____

aware of the criminal consequences foreseen in case of false declarations to a public official (**art. 76 DPR n. 445/2000 and art. 495 c.p.**)

DECLARE UNDER MY OWN RESPONSIBILITY

- not to be subjected to the quarantine measure or not to have tested positive at COVID-19
(*without prejudice to the movements ordered by the health authorities*);
- that the travel started from _____ (*origin address*)
- with destination _____ (*destination address*)
- to be aware of the contagion containment measures in force as of today concerning the
limitations on the possibility of moving individuals within the national territory;
- to be aware of the further limitations provided for by the Order of the Minister of Health and
that the movement falls within one of the cases permitted by the aforementioned Decree of
the Italian Prime Minister.

I declare that I am aware of the penalties provided for by art. 4 of the decree law 25 March 2020, n. 19 and subsequent amendments.

In particular, I declare that the travel is determined by:

- ☐ **Business needs/job requirements**
- ☐ **Personal requirements**
- ☐ **Health reasons**
- ☐ **Returning to one's home address, domicile or residence**

In this respect, I declare that: _____

Date, time and place of control: _____

Signature of the declarant

Police Officer