

SELF-DECLARATION PURSUANT TO ARTICLES 46 AND 47 DECREE OF THE PRESIDENT OF THE
REPUBLIC NO. 445 / 2000
VALID FOR STAFF TRAVELER (*EG DRIVERS*) IN CHARGE OF THE ROAD TRANSPORT (GOODS
AND PASSENGERS) EMPLOYED BY COMPANIES REGISTERED **NOT IN ITALY**

The undersigned _____ (1)
Born in _____ (2)
On _____ (3)
Citizenship _____ (4)
resident in _____ (5)
full address _____ (6)
Identity document (A) _____ (7)
mobile phone number _____ (8)

AWARE OF THE CRIMINAL CONSEQUENCES PROVIDED IN THE EVENT OF MENDATE
DECLARATIONS TO OFFICIAL PUBLIC (ARTICLES 483 AND 495 ITALIAN CRIMINAL CODE)
DECLARES UNDER ITS RESPONSIBILITY:

1. to be aware of the measures to contain COVID-19 epidemic (contagion) in force today and adopted pursuant to art. 1 and 2 of the law decree 25th March 2020, n. 19, concerning the limitations on the possibility of displacement of people within the whole national territory;
2. to be aware of the further limitations laid down by regional measures;
3. not to be subjected to the quarantine measure and not to have tested positive for the COVID-19 virus;
5. to be aware of the penalties provided for by art. 4 of Legislative Decree March 25, 2020, n.19;

ALSO DECLARES

1. to have entered Italy from _____ on (B) ___ / ___ / _____ at ___ / ___ hours (9), with the vehicle type _____ make _____ model _____, license plate _____ registered in _____;
2. to be directed to _____, by staying at _____ (10), and to remain in Italy until ___ / ___ / _____ at ___ / ___ hours;(11)
3. to have communicated the entry into Italy to the Prevention Department of the competent Health Authority of _____ on _____ at ___ / ___ / ___ hours;(12)
4. that in the event of motivated needs, he will be able to stay in Italy only for a further 48 hours and that, in this case, he undertakes to issue a declaration similar to this;
5. that the stay in Italy is motivated exclusively by the following work needs

_____ (13)

6. to assume the following obligations:

- at the end of the period of stay, immediately leave the national territory and, failing that, begin the period of health surveillance and trust isolation for a period of fourteen days at the home, residence or place of stay indicated in point 2;
- in the event of the onset of COVID-19 symptoms, to report this situation promptly to the Health Authority through the specifically dedicated telephone numbers.

PLACE AND DATE OF THE CHECK (14)

THE POLICE OPERATOR

NAME AND SURNAME (15)

INSTRUCTIONS FOR COMPLETING THE DECLARATION

Fill in the declaration in CAPITAL LETTERS

The declaration must be completed upon entering Italy and always carried with you, even when the declarant is not driving.

The declaration must be delivered to the police operator.

At the time of the check, the declaration will be withdrawn by the police operator. In this case it will be necessary to prepare another declaration.

The declaration is valid for a maximum period of 72 hours from entry into Italy.

For motivated needs it is possible to extend the stay for another 48 hours. In this case, another declaration must be prepared.

In case of transit, the declaration is valid for a maximum period of 24 hours from entry into Italy.

For motivated needs it is possible to extend the stay for another 12 hours. In this case, another declaration must be prepared.

1. Indicate first name first and then surname.
2. Indicate the place of birth (city etc.) and the country of birth.
3. Indicate the date of birth (*dd / mm / yyyy*).
4. Indicate the country of citizenship.
5. Indicate the city / place of residence and the state.
6. Indicate the full address of residence: the street, square etc.
7. Indicate type of document (e.g. IC\passport), number, authority that issued it, issue and expiry date.
8. Indicate your mobile phone number to receive communications while staying in Italy.
9. Indicate the crossing point or border from which you entered the Italian territory, the date (*dd / mm / yyyy*) and the time (*h: xx.xx*) of entry.
10. Indicate the place of destination (the end of the trip to Italy or the foreign country if it is a transit) and the address of the home, dwelling or place where any stay will be made.
11. Indicate the date (*dd / mm / yyyy*) and the time (*h: xx.xx*) of exit from the Italian territory.
12. The communication must be made to the prevention department of the competent healthcare company based on the place of entry on the national territory. The same communication must be made even if entry into Italy took place only for transit to reach another state (EU or non-EU). In the latter case, the maximum period of stay on the national territory is 24 hours, extendable for specific and proven needs of an additional 12 hours. Beyond this period, the obligations of health surveillance and trust isolation for 14 days apply, simultaneously communicating the circumstance to the competent Health Authority for the territory where isolation is observed.
13. Indicate the reasons for your stay in Italy (for example, but not limited to: *"delivery of goods to and coming from "* - *"Taking charge of the goods at and directed at"*- *"passenger transport to and coming from"* - *"passenger transport from and direct to....."*)
14. The place and date of the check must not be indicated: they are the responsibility of the police operator.
15. Indicate the name and surname of the declarant. The declaration must be signed in the presence of

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A The document must be presented to the police operator and must allow identification of the declarant's citizenship.

B The stay in Italy is allowed for a maximum period of 72 hours, extendable for motivated needs of another 48 hours.

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