

The undersigned \_\_\_\_\_, born on the \_\_\_\_\_ in \_\_\_\_\_, residing in \_\_\_\_\_, street/road \_\_\_\_\_, identified by Document \_\_\_\_\_ nr. \_\_\_\_\_ number of telephone \_\_\_\_\_, aware and informed of the criminal consequences in case of false declarations to a public official (art 495 of the criminal code)

### **DECLARES UNDER ITS RESPONSIBILITY**

- To be **aware of the infection containment measures** referred to art. 1, paragraph 1, of the *President of the Council of Ministers' Decree of 9 March 2020* about **the travel of persons within the whole national territory**,
- **not to be subjected to the quarantine measure** and not to have been positive tested for the COVID-19 virus referred to article 1, paragraph 1, letter c), of the President of the Council of Ministers' Decree of 8 March 2020;
- **To be aware of the penalties provided for by the combined provisions of art. 3, paragraph 4, of Legislative Decree February 23, 2020, n. 6 and art. 4, paragraph 2, of the President of the Council of Ministers' Decree of 8 March 2020 in case of non-compliance with the aforementioned containment measures (art. 650 of the Criminal Code unless the fact does not constitute a more serious crime)**
- That the travel is determined by:
  - proven business needs;
  - situations of necessity;
  - health reasons;
  - or return to own home or own residence.

In this regard, declares that \_\_\_\_\_  
(I WORK AT..., I AM RETURNING TO MY HOME SITE IN ... .., I MUST PERFORM A MEDICAL EXAM ... OTHER SPECIAL REASONS ... ETC ...

Date, time and place of check

Signature of the declarant

Police Operator