

## COVID-19 Property Showing Health Disclosure Declaration

**Prior to entering the listed property at \_\_\_\_\_, on \_\_\_\_\_, please consider the health and safety of others.**

**Buyer REALTOR® sales representative (please print name): \_\_\_\_\_**

**Phone Number: \_\_\_\_\_**

***I confirm the following statements to be true (check all that apply):***

- I have not travelled anywhere outside of Canada, or been in contact with anyone who has travelled outside of Canada, in the last 14 days.
- I have not experienced any of the following symptoms in the last 14 days: fever, dry cough, shortness of breath, or difficulty breathing.
- I have not knowingly come into contact with anyone experiencing any of the following symptoms in the last 14 days: fever, dry cough, shortness of breath, or difficulty breathing.
- I have not knowingly come into contact with anyone with a presumptive or confirmed COVID-19 diagnosis in the last 14 days.

**Buyer/Buyer Prospect #1 (please print name): \_\_\_\_\_**

***I confirm the following statements to be true (check all that apply):***

- I have not travelled anywhere outside of Canada, or been in contact with anyone who has travelled outside of Canada, in the last 14 days.
- I have not experienced any of the following symptoms in the last 14 days: fever, dry cough, shortness of breath, or difficulty breathing.
- I have not knowingly come into contact with anyone experiencing any of the following symptoms in the last 14 days: fever, dry cough, shortness of breath, or difficulty breathing.
- I have not knowingly come into contact with anyone with a presumptive or confirmed COVID-19 diagnosis in the last 14 days.

**Buyer/Buyer Prospect #2 (please print name): \_\_\_\_\_**

- I have not travelled anywhere outside of Canada, or been in contact with anyone who has travelled outside of Canada, in the last 14 days.
- I have not experienced any of the following symptoms in the last 14 days: fever, dry cough, shortness of breath, or difficulty breathing.
- I have not knowingly come into contact with anyone experiencing any of the following symptoms in the last 14 days: fever, dry cough, shortness of breath, or difficulty breathing.
- I have not knowingly come into contact with anyone with a presumptive or confirmed COVID-19 diagnosis in the last 14 days.

**Buyer/Buyer Prospect #3 (please print name): \_\_\_\_\_**

***I confirm the following statements to be true (check all that apply):***

- I have not travelled anywhere outside of Canada, or been in contact with anyone who has travelled outside of Canada, in the last 14 days.
- I have not experienced any of the following symptoms in the last 14 days: fever, dry cough, shortness of breath, or difficulty breathing.
- I have not knowingly come into contact with anyone experiencing any of the following symptoms in the last 14 days: fever, dry cough, shortness of breath, or difficulty breathing.
- I have not knowingly come into contact with anyone with a presumptive or confirmed COVID-19 diagnosis in the last 14 days.

**Access to this property will not be granted for any REALTOR® or Buyer/Buyer Prospect who has either not completed this form, or has been unable to check all of the above 4 criteria.**

***Thank you for your co-operation.***