



CITY OF SAINT PAUL ALASKA

COVID-19 TRAVEL FORM

Each Traveler must fill out a form, regardless of age or whether an employer has filed a plan or protocol with the State of Alaska. **EXCEPTION** – For fishing vessels with multiple employees, a supervisor or captain may list all employees under one form and only submit one form to cover all employees on the vessel. Attachment A allows for listing multiple names. The person filling out the application on behalf of a vessel should fill out all other portions of this form.

Full Name: _____

Business/Vessel Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone No.: _____ E-mail : _____

Occupation: _____ Employer: _____

Final Destination: _____

Self-quarantine address (if different) _____

PLEASE LIST THE SPECIFIC PLACES TRAVELLED WITHIN THE PREVIOUS 14 DAYS.

1. _____ 2. _____

3. _____ 4. _____

REASON FOR TRAVEL:

Travel is currently not permitted into St. Paul Island, with limited exceptions. Please check below which exception applies to you:

Emergency first responder

Law enforcement acting within their official duties

Office of Children's Services

Essential Government Services Personnel

Resident returning to St. Paul Island

Subsistence or Commercial Fishing, including contract services

Essential Services & Critical Workforce: Healthcare Operations & Public Health

Essential Services & Critical Workforce: Telecommunications

Essential Services & Critical Workforce: Utility Operations and Maintenance

Essential Services & Critical Workforce: Air Transportation/Logistics

Essential Services & Critical Workforce: Certified Plumber/Electrician/Mechanic/Licensed Service Provider to maintain the safety, sanitation and essential operation of residences, transportation, and commercial fishing infrastructure

Essential Services & Critical Workforce: Supply of fuel (including heating oil, diesel fuel, aviation fuel, propane and gasoline)

I do not fit one of the exceptions, but I am requesting permission to travel to St. Paul Island

Please explain the reason for your travel to St. Paul Island to ensure compliance with City Ordinances and State Mandates.

EMPLOYER PLANS

If you are an employee, traveling for essential purposes, has your employer filed a plan or protocol with the State of Alaska? Yes: No:

Has the plan been approved by the State of Alaska? Yes: No:

Please explain the plan that you or your employer have for the following:

- a. What is your plan to self-quarantine upon arrival? How will you obtain essential goods and services? _____

- b. How do you or your business intend to quarantine personnel who develop a fever, cough or shortness of breath while in St. Paul Island _____

- c. How you or your business intend to provide medical evacuation from St. Paul Island if necessary?

AGREEMENT TO FOLLOW COMMUNITY SAFETY LAWS

Initial the following acknowledging your agreement to adhere to local laws. For fishing vessels filling out one form for multiple employees, by initialing, you acknowledge that you have explained these requirements to all employees and that as an employer, captain, or supervisor, you will require adherence to local laws:

I agree to obtaining a test for COVID-19 prior to travel to Saint Paul Island and within 5-7 days after arrival on Saint Paul Island.

I will not travel to Saint Paul Island if symptomatic.

Send completed forms via email to snpcovid19@stpaulak.com

I agree to submit to health screening in Saint Paul Island, if requested.

I agree to wear face coverings as recommended in Health Alert 010 issued April 3, 2020, when outside personal lodgings and in Saint Paul Island.

I agree to follow the curfew and any other local ordinances or emergency orders that are in place or may be in the future.

I agree to self-quarantine for 14 days.

I agree not to enter residences in Saint Paul Island other than my own lodging.

Certificate: Read and Sign: I swear or affirm, under penalty of perjury, that: the above information on this document is true and correct. **WARNING:** If you provide false information on this form, you may be convicted of a Class B felony under AS 11.56.200 and/or a Class A misdemeanor under AS 11.56.210. Additionally, due to the imminent danger to the public by the spread of Coronavirus, if you violate the self-quarantine regulations set forth in the mandate, you may also be convicted as a class A misdemeanor which is punishable by a fine of up to \$25,000 or imprisonment of not more than one year, or both pursuant to Alaska Statute 12.55.135. You may also be cited for a minor offense under local ordinance and subject to a \$500 fine.

SIGNATURE: _____ DATE: _____

*****For City of Saint Paul Use Only*****

Approved: Denied:

CITY MANAGER SIGNATURE: _____ DATE: _____

DENIED BY THE CITY MANAGER FOR FOLLOWING REASONS:

CITY OF SAINT PAUL MAYOR'S REVIEW

MAYOR SIGNATURE: _____ DATE: _____

Approved: Denied:

THE MAYOR'S DECISION ON APPEAL SHALL BE THE FINAL CITY ACTION ON THE APPLICATION