

CITY OF SAINT PAUL

ALASKA

GROUP COVID-19 TRAVEL FORM #01

This form is to be completed within 48 hours before coming to Saint Paul Island.

This form is to be used by businesses or vessels that have five (5) or more employees traveling to Saint Paul Island on the same day.

Business/Vessel Na	me:	
Address:		
City:	State:	Zip Code:
Phone No:	Email:	
Self-Quarantine Ad	ldress (if different from above):	
	EMPLOYEES TRAVE	ELING
name of each employ result from a molecul	yee traveling to Saint Paul Island to perform work for lar-based test for SARS-CoV2, either a PCR or rap	adsheet along with this form, listing the first and last or the business or vessel listed above. A negative test id (e.g. Abbott IDNow) test taken within 72 hours of d form and the spreadsheet of the employees' names.
	DATES OF TRACE	
Estimated Date/T	Time of Arrival to Saint Paul Island:	
	REASON FOR TRA	VEL
Please describe your	reason for travel below:	
processors	and transporters of fish and those providing or related to maintenance and operation of commerces	contract services to fishermen, processors and
Persons en	gaged in education, which shall be limited to ins	tructional staff and administrative support staff.
Persons en	ployed in the following categories:	
Не	althcare Operations and Public Health	
	blic Works, including water, sewer, gas, electrical did waste collection and removal	al, roads and highways, public transportation, and
Тес	chnology/Communications	

City of Saint Paul, Alaska

Group COVID-19 Travel Form #01

AGREEMENT TO FOLLOW COMMUNITY SAFETY LAWS

provide a response within three (3) businesses day. All plans and documents can be submitted to snpcovid19@stpaulak.com.

Group COVID-19 Travel Form #01		
I	on behalf of	am authorized to acknowledge that all the
employ	ees listed in the attached spreadsheet agree to the following rec	quirements and will adhere to all local laws:
Initial		
	Employees agree to a molecular-based test for SARS-CoV2 wand to provide a copy of my test results attached to this form.	within 72 hours prior to traveling to Saint Paul Island
	Employees will not travel to Saint Paul Island if symptomatic.	
	Employees will not travel to Saint Paul Island if infected with	COVID-19.
	Employees agree to submit to health screening in Saint Paul I	sland, if requested.
	Employees agree to wear cloth face covering when outside pe	ersonal lodgings and in Saint Paul Island.
	Employees agree to follow local ordinances that are in place of	or may be in the future.
	Employees agree to self-quarantine for 14 days (Non-Essentia	al Persons Only)
	Employees agree not to enter residences in Saint Paul Island	other than my own lodging.
	Employees agree not to invite visitors to the location where I	am quarantined.
	Employees agree that all personnel will not enter the Aleut Co Hall, and other public facilities that are open to the general pu	

ENFORCEMENT AND PENALTIES

Employees agree that if need gasoline from the Gas Station I must remain in my vehicle and ask for assistance.

By signing this document, you are making a sworn statement. 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.

The Saint Paul Department of Public Safety is authorized to enforce individual compliance with City Emergency Ordinances, with the primary focus being on education and voluntary compliance before civil penalties or criminal charges. The Saint Paul Department of Public Safety will respond to complaints and educate the public when they see violations that jeopardize the safety of individuals or the community. However, individuals who violate the Emergency Ordinances risk civil fines and criminal prosecution.

The Saint Paul Department of Public Safety will first attempt to enforce Emergency Ordinances through education. In the event education does not result in voluntary compliance, the Saint Paul Department of Public Safety is authorized to:

• Issue a verbal or written warning and opportunity to correct actions.

City of Saint Paul, Alaska

- Issue a citation to Saint Paul Island Tribal Court for Civil Mischief for members of the Aleut Community of Saint Paul Island.
- Issue a citation for a Level III offense punishable in accordance with CCO 09.05.020 resulting in mandatory fines increasing in increments of \$50.00 up to the maximum of \$300.00.

The Saint Paul Department of Public Safety's enforcement responsibilities will enforce State COVID-19 Health Mandates and applicable Alaska Statutes, including but not limited to Reckless Endangerment pursuant to AS 11.41.250.

CERTIFICATE AND SIGNATORY

this document is true and correct. A notary public or other official empowered to administer oaths is unavailable. AUTHORIZED SIGNATURE: DATE: Travel to Saint Paul Island, Alaska must be approved prior to anyone traveling to the island. A traveler who was denied travel by the City Manager can appeal the decision to the City Council of the City of Saint Paul. THE CITY COUNCIL'S DECISION ON APPEAL SHALL BE THE FINAL CITY ACTION. Please complete this form and submit to the City of Saint Paul by emailing to snpcovid19@stpaulak.com or faxing to 907-546-3188. **For City of Saint Paul Use Only*** Travel Approved Travel Denied City Manager Signature: Date: Denied by the City Manager for following reasons: City Council review: Date: _ City Manager Signature: _____ Travel Approved Travel Denied THE CITY COUNCIL'S DECISION ON APPEAL SHALL BE THE FINAL CITY ACTION.

I certify under penalty of perjury that the foregoing is true swear or affirm, under penalty of perjury, that: the above information on