



COMMONWEALTH AUTOMOBILE REINSURERS

Visitor Health Screening Attestation

Please check all that apply – sign and date before providing to your CAR host

I do not have a temperature of **100.4** or higher.

I do not feel ill and do not have any of the following COVID-19 like symptoms:

- Fever or chills
- Shortness of breath
- Body aches
- Extreme fatigue
- Loss of taste or smell

No household member or person I've had close contact with has become ill with COVID-19 like symptoms or tested positive for COVID-19 within the past 14 days.

I have not been asked to self-isolate or quarantine by my doctor or a public health official.

Visitor Name (Print)

Visitor Signature

Date

If you are unable to certify the above, please inform your host and leave our facilities immediately.