

We consider the health and wellness of all a priority. In order to limit exposure to the risks related to COVID -19, certain precautions are required. To this end, we ask you to complete the following questionnaire as we may find ourselves obliged to refuse all those who pose a health risk. Thank you in advance for your collaboration in our effort for the common good.

THANK YOU IN ADVANCE FOR YOUR COLLABORATION IN OUR EFFO	RT FOR THE COMMON GOOD.	
Name (buyer, vendor, tenant or broker):	Date and Time:	
Name of your organization:	Name of the person visited:	
Telephone number where you can be reached:	City / Town:	
Please answer the following questions. Note that if a positive response is automatically cancelled and all parties must be notified immediately:	is provided by the seller, the inspection	
VOLUNTARY DECLARATION		
1. Have you travelled outside of Canada in the last 14 days?		
Yes No		
In the last 14 days, have you been in contact with someone diagnosed wire of symptoms of COVID-19? Yes No	th COVID-19 or who is in isolation because	
3. Have you had any cold or flu symptoms in the last 14 days? (Fever, coug	h, sore throat, respiratory difficulties)	
4. To your knowledge, has the building been occupied in the last 6 days by s diagnosis for Covid-19? Yes No	omeone who has received a positive	
IMPORTANT! The information on this document is likely to be shared with third parties linked to this real-estate transaction. By signing below, you consent to the sharing this information with third parties.		
Signature :	Date :,	2021.
For further information, we invite you to apply preventative hygiene measure https://www.canada.ca/en/public-health/services/diseases/2019-novel-coror	•	