

THE NEW YORK STATE DEPARTMENT OF HEALTH (DOH) RECOMMENDS THAT THIS SCREENING QUESTIONNAIRE BE DONE REMOTELY WHENEVER POSSIBLE

As part of the phased re-opening for real estate, the DOH released "*Interim Guidance for Real Estate Services During the COVID-19 Public Health Emergency*". Within the document, guidance is provided for screening Sellers/Buyers/Landlords/Tenants prior to showing a property in-person. The purpose of the screening questionnaire is to assist the DOH with tracking and tracing COVID-19 exposure and prevent further outbreaks.

Individuals traveling to NY from a non-contiguous state or CDC Level 2 or higher health notice country are subject to a 10-day quarantine but will have the ability to shorten the quarantine requirement by "testing out" through two negative COVID tests. Information on requirements for "testing out" can be found here: <u>https://coronavirus.health.ny.gov/covid-19-travel-advisory</u>

You are being asked to provide your contact information, such that all contacts may be identified, traced and notified in the event an individual is diagnosed with COVID-19

Name:		Date:
Property Address being shown: _		
Phone:	Email:	
Below, please check all that apply	<i>i</i> to you:	
, , , , , , , , , , , , , , , , ,	in close or proximate contact in t r COVID-19 or who has or had sy	
have you tested positive f	or COVID-19 in the past 14 days	
have you experienced any	y symptoms of COVID-19 in the pa	ast 14 days
have you travelled from a	non-contiguous state (If yes answ	er below)
I have completed the mar of the 10-day quarantine	datory 10-day quarantine or met t	the requirements to "test out"
	omatic and/or test positive for C	

tracking and tracing can be completed.