



COVID-19 HEALTH SCREENING QUESTIONNAIRE

CO-BRANDING AREA

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

On September 6, 2021, the DOH designated COVID-19 to be “a highly contagious communicable disease that presents a serious risk of harm to the public health”. The purpose of the screening questionnaire is to assist the DOH with tracking and tracing COVID-19 exposure and prevent further outbreaks.

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 to you:

\_\_\_\_\_ have you knowingly been in close or proximate contact in the past 14 days with anyone who has tested positive for COVID-19 or who has or had symptoms of COVID-19

\_\_\_\_\_ have you tested positive for COVID-19 in the past 14 days

\_\_\_\_\_ have you experienced any symptoms of COVID-19 in the past 14 days

**In the event you become symptomatic and/or test positive for COVID-19 within 48 hours of the last visit to the property, you must notify the real estate agent immediately so proper tracking and tracing can be completed.**