**Certificate of Compliance for Seaglass Village Rentals**

This form is to be completed for our records for those guests that reside in Maine, New Hampshire, Vermont, or Massachusetts that are exempt from the Quarantine guidelines issued by the state.

To help “Keep Maine Healthy,” guests of Maine commercial lodging establishments are required to complete this certificate prior to their stay. This initiative promotes the safety of owners and guests of Seaglass Village.

To that end, the State of Maine asks you to review and attest to the following:

1. I certify that I have not experienced or displayed any of the following COVID-19 symptoms in the last 24 hours:

\_\_Fever or chills

\_\_Sore throat, cough, shortness of breath, or other respiratory symptoms

\_\_Muscle aches, severe fatigue, or chills

\_\_Changes in taste or smell

2. \_\_I certify that I have not had close contact with anyone over the last 14 days who is confirmed to have COVID-19.

3. I certify that ONE of the following is true (PLEASE CHECK ONE):

 \_\_I have received a negative test result for COVID-19 on a specimen taken no later than 72 hours prior to my OR arrival, consistent with Maine CDC guidance.

 \_\_I reside in Maine, New Hampshire, Vermont, or Massachusetts that are exempt from the Quarantine guidelines issued by the Governor of Maine.

4. While in Maine, I agree to do my part to Keep Maine Healthy by following recommended safety measures in order to protect myself and others.

5. I also certify that all persons in my care who are under the age of 18, or who are dependent on my care, meet the criteria described in items 1 and 2. Please provide the ages of such persons in your care. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. I have read and understand this entire Certificate of Compliance and agree the certifications made above are accurate. Guests may be asked to furnish proof of the negative test result or residency upon request.

Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Maine.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone while in Maine: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Additional Persons from the Same Household that will staying in the cottage

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_