

FORMAL STATEMENT PURSUANT TO LAW DPR N. 445/2000 ART.46,47

The undersigned (surname name) _____, born on ___/___/___, in _____, permanent address _____, living address _____, type of identification document (Passport, ID) _____, number _____, issued by _____ on ___/___/___, phone number _____, aware of criminal consequences in case of false statements given to a Police Officer as provided by the Italian Criminal Law (**art. 495 C.P.**)

HEREBY DECLARES UNDER ITS OWN RESPONSIBILITY

- to be aware of the current COVID-19 contagion regulatory measures in force as of today, relating to restrictions to individual travel and movement within the entire country;
- to be aware of further restrictions set out in ordinances or in other administrative measures adopted by the President of the Region or by the Mayor in accordance with current regulations;
- to be aware of the penalties provided for by the Decree Law of the 25th of March 2020 art.4, n. 19, and by the Decree Law of May 16th 2020 art.2, n.33;
- that the movement is due to:
 - Proven working needs;
 - Health needs;
 - Other reasons allowed by the aforementioned regulations, decrees, and ordinances that define the measures to counter the spread of COVID-19 epidemic (please specify the reasons);

➤ **to be travelling from:** (departure address)

➤ **to:** (destination address)

➤ **regarding the movement, the undersigned declares:** (specify the reasons)

Date, time and place _____

Declarant's Signature

Police Officer
