

**PRE-SCREENING HEALTH SURVEY FOR EMPLOYEES AND VISITORS ENTERING
STATE OF PENNSYLVANIA FACILITIES DURING COVID-19 PANDEMIC**

In the past 14 days have you had close contact with a person confirmed to have COVID-19?	Yes No
Today or in the past 24 hours have you had any of the following symptoms?	
Cough	Yes No
Shortness of Breath or Difficulty Breathing	Yes No
Fever (> 100.4°F / 38°C) or felt feverish	Yes No
Chills	Yes No
Muscle Pain	Yes No
Sore Throat	Yes No
New loss of taste or smell	Yes No

Source: <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>

You (renter) are required to notify the owner of the property if you believe you have Covid while at the property. The CDC then may require you to self-quarantine in the state for 14 days. You hold harmless and Indemnify the owner. You also then would be liable to pay the prevailing daily rate on rent while under quarantine. If you fail to pay the daily rate you will be subject to a lawsuit to collect the rent, 10% interest and legal fees during collection process. There will be an extra Covid cleaning fee of \$250.

Renter name (print): _____

Renter signature: _____

Date: _____