

ACKNOWLEDGEMENT

1. Name/Surname _____

2. Citizenship _____

3. Passport series and number _____

4. Current Address in Home country: _____

5. Address of residence in Uzbekistan for the next 14 days starting from today:

_____ mobile number: _____

6. Departure Date _____ from country with reported cases of COVID-19

(indicate which country you arrived from)

7. I undertake to comply with the restrictive and sanitary-antiepidemic regime within 14 days from the moment of arrival in the Republic of Uzbekistan, namely:

1. DO NOT leave the place of residence (house, apartment, hotel)
2. In the presence of people in the room to wear a medical mask, changing every 2-3 hours;
3. Observe hand hygiene, often wash with soap and, preferably, with a hand sanitizer;
4. If the first symptoms of coughing, sneezing, fever, chills, difficulty breathing appear, ask for medical help immediately.

The requirements and rules of the restrictive and sanitary-anti-epidemic regime are familiar to me.

If I do not fulfill the above requirements, I am ready to suffer the appropriate punishment (under Articles 195 and 257¹ of the Criminal Code of the Republic of Uzbekistan).

Date: _____ Signature: _____

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