

Self-Declaration concerning the DMK Hygiene Concept for External Employees of Maintenance and Installation Companies (Special Query for Visitors is thus not necessary)

| First name, surname: |
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| Employer: |
| Company address: |
| Phone number: |
| DMK site: |
| Customer at DMK: |
| DMK contact person on site: |
| Date: Time from / until: |
| Order duration (if several working days): |
| Please note that you may only be accompanied to and from your work area by the contact persor responsible for you. Your contact remains your contact person during your entire stay. |
| You hereby confirm that on the day of your visit |
| you do not have flu-like symptoms (e.g. fever, dry cough, shortness of breath, loss of taste); you have not had contact in the last 10 days (different country-specific regulations must be observed) with a person who has tested positive or a suspected case; you have complied with the country-specific regulations regarding quarantine and test procedures when entering the country from a foreign risk area. |
| You also confirm that you have read and comply with the DMK Hygiene Concept. |
| Place, date, signature: |
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