



Homeowner Self-Assessment Declaration – Installation

Name		Job reference	
Home address			
City		Postcode	
Date form completed			
Installing company	Composite Doors Cardiff Limited		
Installation date			

Declaration

To be completed and sent to surveyor no more than 24 hours prior to scheduled site visit

1) Are you, or anyone in your household considered to be in the vulnerable group who are at increased risk of severe illness from coronavirus? <i>(put an X in the relevant box)</i>			
YES		NO	
Please specify details of vulnerable occupants <i>(put an X in the relevant box)</i>:			
	Extremely Vulnerable (received NHS letter)		
	Vulnerable (underlying health condition and/or is aged over 70)		
	Other (please specify below)		
2) Is your household or anybody in your household self-isolating? <i>(put an X in the relevant box)</i>			
YES		NO	
Please specify details of isolation:			
3) Have you or anyone in your household experienced any recognised coronavirus symptoms in the past 7 days? (including today) e.g. a continuous cough or a high temperature. <i>(put an X in the relevant box)</i>			
YES		NO	
4) There is only one WC at my property and therefore surveyor must arrange mobile WC facilities. <i>(put an X in the relevant box)</i>			
YES		NO	

EMERGENCY CONTACT NAME	
EMERGENCY CONTACT TELEPHONE	

Terms and Conditions:

- Respect social distancing by remaining a minimum of 2 metres away from site operative(s) and keep family members away from the room where work is being carried out wherever possible.
- Do not offer the site operative(s) food or drink.
- Help the site operative(s) to work room by room.
- Co-operate with the site operative(s) to help everyone stay safe and follow the Government coronavirus social distancing guidelines.
- Stop or limit visitors to the home during the survey, wherever possible.
- Inform the installation company management and site operative(s) immediately if a member of the household becomes unwell with any recognised symptoms of coronavirus.

By signing this form, I hereby confirm that the information I have given above is up-to-date, true, and that I will comply with the conditions set out in the above.

Signature	
Name	
Date	