

Public Health Passenger Locator Form

Thank you for helping us protect your health

→ Travelling by air

Fill in all data and print this form **before boarding**. Failing to do so may result in refusal of boarding. Upon arrival from outside the Schengen Area, the form should be given to a border officer at your point of entry.

→ Traveling by train, bus, car or boat

Fill in this form and email it on the day of arrival to PLFBelgium@health.fgov.be

→ Providing false, misleading or incomplete information may result in refusal of entry at the border and immediate return can be imposed. Information indicated with a * is mandatory

With this form **you consent to the health requirements** imposed by the Belgian authorities. Failure to comply may result in civil or criminal penalties. With this form **you consent to stay in quarantine for 14 days** upon arrival in Belgium at the address provided below. Passengers from the EU+ area are exempt, provided they do not come from a high-risk area as defined by the Belgian authorities.

Instructions

- This form has to be completed by all passengers arriving in Belgium following a stay
 - o outside the Schengen Area;
 - in a high-risk area as defined by the Belgian authorities¹ and located inside the EU+ area².
- Providing **readable** and full contact details is crucial.
- Every passenger aged 16 or older must fill in a form.
- Details of children under the age of 16 should be included in the form of the accompanying adult.
- If any of the information you provide on this form changes in the next 14 days, you are required to send an email with your complete and updated information to the following email address: PLFBelgium@health.fgov.be.
- Information regarding the Covid-19 health guidelines is available on www.info-coronavirus.be.

Data protection

This form will enable public health officers to locate you in case you have been exposed to a serious communicable disease. The information you provide may be used to contact you in the next 14 days for the purposes of verifying the details given on this form. This information may also be used for the purposes of contact tracing in relation to confirmed or suspected cases of Covid-19. Your information is intended to be held in accordance with applicable laws and used only for public health purposes³.

Place: Date:
(E-)Signature:
I HAVE TAKEN NOTICE OF THE INFORMATION PROVIDED ON THIS FORM AND HAVE
MADE A TRUTHFUL DECLARATION.

Andorra; Austria; Belgium; Bulgaria; Croatia; Cyprus; Czech Republic; Denmark; Estonia; Finland; France; Germany; Greece; Hungary; Iceland Ireland; Italy; Latvia; Liechtenstein; Lithuania; Luxembourg; Malta; Monacco; the Netherlands; Norway; Poland; Portugal; Romania; Slovakia; Slovenia; Spain; Sweden; Switzerland; United Kingdom; Vatican City.

¹ <u>https://diplomatie.belgium.be</u>

³ The Federal Public Service Health, Food Chain Safety and Environment is the data controller for the information provided on this form. Personal data contained in this form may be collected and processed by the data controller, by Border Control and by the Regional Health Authorities, in case of contact tracing. This form and any copies of it, will be destroyed 28 days after your arrival.

