



PEI Resident Support Self-Declaration Form

Section 1: Personal Information			
This section includes information about the PEI Resident(s) who have agreed to provide accommodation to individuals entering PEI who are required to self-isolate for up to 14 days.			
Name:	First:	Last:	
City Town:		Province:	
Phone:		Postal Code:	
Email address (required):			
Section 2: List of all PEI residents living at the above residence (add additional page if required)			
1.	First:	Last:	Signature:
2.	First:	Last:	Signature:
3.	First:	Last:	Signature:
4.	First:	Last:	Signature:
5.	First:	Last:	Signature:
Section 3: Declaration			
It is an offence to knowingly furnish false information to a public health official under section 61(4) of the Public Health Act. I declare that the information provided in this form is accurate and complete			
PEI Resident – Primary Support Name:			
Signature:		Date:	
Emergency Measures Organization Use Only			
Date received:			
Received by name and signature:			