

FREMONT COUNTY TREASURER'S OFFICE COVID 19 POLICY

- 1) By appointment only: a. All visitors are to call before entering building
- b. Each visitor will need to schedule an appointment with each department separately

2) Entry Requirements:

a. Screening questions –

i. Do you have any of the following symptoms:

- Cough
- Shortness of breath or difficulty breathing
- Chills
- Muscle pain
- Headache Sore throat
- Loss of taste or smell

ii. Do you live with anyone who has symptoms of COVID-19 or has tested positive for COVID-19?

iii. Have you provided care for anyone with symptoms of COVID-19 or has tested positive for COVID-19?

iv. Have you had close contact (within 6 feet for more than 2 minutes) with a person who is visibly sick with respiratory symptoms or says they are sick with fever or respiratory symptoms? If the person answers YES to any of these questions, do not allow entry.

3) Persons requesting access to the courthouse will need to provide their own PPE. a. Proper PPE/Precautions

- A Mask will be worn at all times while in the Courthouse.
- Upon entry of the building, visitors are to use hand sanitizer per guidelines from the CDC.
- Visitor is to keep a 6-foot distance from any other person in the building at all times.
- Visitor is only allowed in the office in which they have an appointment.

4) Office staff will sanitize the area where the visitor was after every appointment.

Failure to comply with these rules is a violation of the Fremont County Treasurers COVID -19 Policy and admittance to the office will not be allowed.

A visitor is required to remain in the perspective office during their allotted time. If they leave for any reason, they will need to complete the appointment process for re-entry.

Each department head will determine if it is necessary for an individual to enter the courthouse. If any other means is available to provide the information requested by the person this means will be utilized first. Entry into the courthouse will only be used as a last resort.

I hereby acknowledge that I have read and agree to the requirements for entry stated in the above policy

Printed Name: _____ Signature: _____ Date: _____

Address: _____ Phone Number: _____

Time in: _____ Time out: _____