



**RESPONSIBLE DECLARATION FOR THE SANITARY CONTROL OF THE  
RESTRICTION OF ENTRY AND EXIT OF THE ISLAND ON ALERT LEVEL 3**

**ISLAND ON ALERT LEVEL 3:** \_\_\_\_\_

DIRECTION OF TRAVEL      Entrance to island       Departure from island

**PERSONAL INFORMATION**

SURNAME	SURNAME
NAME	DNI,PASSPORT,NIE
TELEPHONE	E-MAIL

**FROM/TO**

COMMUNITY OR AUTONOMOUS CITY	ISLAND		
MUNICIPALITY	LOCATION		
ADDRESS			
Nº	FLOOR	DOOR	POSTAL CODE

**TRIP DATA**

ARRIVAL OR DEPARTURE DATE	RETURN DATE
AIR LINE	FLIGHT NO.
ORIGIN / DESTINATION (PROVINCE AND ISLAND)	

**DATA OF RESIDENCE OR LOCATION ON THE ISLAND OF DESTINATION AND CONTACT**

ISLAND	MUNICIPALITY		
LOCATION			
ADDRESS			
Nº	FLOOR	DOOR	POSTAL CODE
TELEPHONE	E-MAIL		

## REASON FOR TRAVEL

Assistance to health centers, services and establishments.	
Compliance with labor, professional, business, institutional or legal obligations.	
Attendance at university, teaching and educational centers, including nursery schools.	
Return to the place of habitual or family residence. This exception includes travels to territories that are the place of habitual residence of relatives or persons close to those who are travelling.	
Assistance and care for the elderly, minors, dependents, people with disabilities or especially vulnerable people.	
Travel to financial and insurance entities or refueling stations in neighboring territories.	
Required or urgent actions before public, judicial or notarial bodies.	
Renewals of permits and official documentation, as well as other administrative procedures that cannot be postponed.	
Taking official exams or tests that cannot be postponed.	
Due to force majeure or situation of need.	
Passenger in transit in a port or airport of island on alert level 3 with final destination in another country or another place of the national territory.	
Passenger coming from outside the territory of the Autonomous Community of the Canary Islands who proves a reservation in a tourist accommodation establishment registered in the General Tourist Registry of the Autonomous Community of the Canary Islands.	
Any other activity of a similar nature, duly accredited.	

I declare under my responsibility the veracity of the data that have been recorded:

Place:

Date:

Signature: