

**Tederal Ministry Republic of Austria**Social Affairs, Health, Care and Consumer Protection

## **Entry and Transit Declaration**

Name:
Date of birth:
Austrian citizenship: YES NO
ID-number:
Main or secondary residence/habitual residence in Austria (unless Austrian citizen):
Mobile number (optional):
E-Mail (optional):
For persons who are Austrian citizens/whose main or secondary residence or habitual residence is in Austria:
I undertake to put myself in home quarantine in Austria for 14 days without delay.  If, during home quarantine, a completed molecular biological test for SARS-CoV-2 is negative, the 14-day self-monitored home quarantine may be terminated.
Address for home quarantine:
For persons who are not Austrian citizens/whose main or secondary residence or habitual residence is not in Austria:
Destination:
I hereby declare that I will transit Austria without layover and that my exit from the country is ensured
Date and signature: