



SoundOff Signal Visitor Health Screening

Updated as of 7/20/2020

The safety of our employees, supplier partners, customers, families and visitors remains SoundOff Signal's overriding priority. As the coronavirus disease 2019 (COVID-19) outbreak continues to evolve and spreads globally, SoundOff Signal Management Team & HR are monitoring the situation closely and will periodically update Company guidance based on current recommendations from the Centers for Disease Control and Prevention and the World Health Organization. At this time, visitors are strongly discouraged.

Visitors are only permitted if a critical business need exists for the individual to be at the facility and no other reasonable means of addressing the situation is possible. Prior to entry, a visitor must complete the attached Health Screening Questionnaire. In addition, a visitor must comply with SoundOff Signal's Coronavirus Protocols located on our website at www.soundoffsignal.com.

As a visitor at SoundOff Signal, your participation is important to help us take precautionary measures to protect you and everyone in this building. Thank you for your cooperation.



SoundOff Signal Visitor Health Screening Questionnaire

Visitor Name:	Personal phone number (cell/home)
Visitor's Company/Organization:	Name of SoundOff Signal host:
<input type="radio"/> Main Building	<input type="radio"/> Royal Ct.

In the Past 24 Hours Self-Declaration by Visitor

1.	Subjective fever (felt feverish): <input type="radio"/> Yes <input type="radio"/> No
2.	New or worsening cough: <input type="radio"/> Yes <input type="radio"/> No
3.	Shortness of breath: <input type="radio"/> Yes <input type="radio"/> No
4.	Sore throat: <input type="radio"/> Yes <input type="radio"/> No
5.	Diarrhea (unless due to known cause): <input type="radio"/> Yes <input type="radio"/> No

In the past 14 days, have you:

6.	Have you had close contact with or cared for someone diagnosed with COVID-19 or suspected of having COVID-19 <input type="radio"/> Yes <input type="radio"/> No
7.	Have you travelled outside of Michigan? If yes, where: _____

If the answer is "yes" to any of questions 1 through 6, access to the facility will be denied. If you answered "yes" to question 7, a member of SoundOff Signal's Management Team or HR will determine if entry is permitted.

I acknowledge that the above information is accurate and true. I further acknowledge that I have reviewed SoundOff Signal's Coronavirus Protocols and agree to comply with these protocols.

Signature (visitor): _____ Date: _____

Note: If you plan to be onsite for consecutive days, please immediately advise your SoundOff Signal host if any of your responses change. The information collected on this form will be used to determine your access right to SoundOff Signal facilities. Any questions should be directed to the SoundOff Signal Management Team or HR.

Access to facility (circle one): Approved Denied