



Covid-19 Safety Questionnaire

Please complete and email this safety questionnaire to info@forwardplumbing.ca prior to your appointment.

If you have any questions, call us at 250-240-3997 or email and we would be happy to assist.

Please cancel your appointment if any member of your household is feeling unwell or is experiencing any flu-like symptoms (e.g. fever, cough, difficulty breathing).

We ask that all customers practice safe social distancing and maintain at least 2 meters (6.5 ft) distance, or wear a mask if social distancing is not possible.

Contact Information:

Name: _____

Date: _____

Telephone Number: _____

Email Address: _____

*****If you or any members of your household have travelled outside of Canada within the past 14 days, you are required to self-quarantine *****

Covid-19 Safety Questions

1. Are you experiencing any of the following symptoms?

- | | | |
|------------------------|-----|----|
| • Fever | Yes | No |
| • Cough | Yes | No |
| • Shortness of breath | Yes | No |
| • Difficulty breathing | Yes | No |
| • Chills | Yes | No |
| • Sore throat | Yes | No |
| • Nausea | Yes | No |
| • Muscle aches | Yes | No |

2. Have you had contact with any person with, or under investigation for, Covid-19 in the last 14 days?

Yes No

3. Have you or anyone from your household travelled outside of Canada?

Yes No

4. Have you or anyone from your household travelled to, or had contact with anyone from, the lower mainland in the last 14 days?

Yes No