STOP.

Before entering the premises, all workers and essential visitors must answer the following COVID-19 screening questions before signing in.

1.	Do you have any of the following new or worsening symptoms or signs? Symptoms should not be chronic or related to other known causes or conditions.				
	Fever or chills		□ У	∕es □	No
	Difficulty breathing	□ Y	∕es □	No	
	Cough	□ Y	′es □	No	
	Sore throat, troub	□ Y	′es □	No	
	Runny nose/stuffy nose or nasal congestion			∕es □	No
	Decrease or loss	□ Y	′es □	No	
	Nausea, vomiting	□ Ү	′es □	No	
	Not feeling well, extreme tiredness, sore muscles		□ Y	′es □	No
2.	Have you trav	elled outside of Canada i	n the past 14 d	lays?	
	☐ Yes	□ No			
3.	Have you had COVID-19?	close contact with a con	firmed or prob	oable case	e of
	☐ Yes	□ No			
th fo	e workplace. Pleas	to all questions from 1 through is se affirm that you have complete g the premises, and adhere to pl	ed your screening	on the sign	-in
lf y	ou answered 'Yes	' to any of the questions from 1 t	hrough 3, you hav	ve not passe	ed,

ONTARIO REAL ESTATE ASSOCIATION

and you should not enter the workplace. You should go home to self-isolate

immediately and contact your health care provider or Telehealth Ontario (1-866-797-0000) to find out if you need a COVID-19 test.