



Data entry form for visitors & service providers (Permanent, for externals with access card)

To be completed by the external visitor or service provider:

Identification:

Name: Company: Purpose: [] Visit [] Service Contact: Siempelkamp company:

Questionnaire *: ... Will be deleted after 14 days in accordance with data protection regulations.

Table with 4 columns: Nr., Question, Yes, No. Contains 5 questions about travel restrictions, COVID-19 testing, special aspects, contact with quarantined persons, and symptoms.

I hereby confirm that I have received the information sheet Rules of Conduct CORONA and will follow the rules described therein. I will immediately report any changes in the information provided. X Date and signature

To be completed by the Siempelkamp employee (customer):

Date of registration: / / 2021 Time: :

Table with 4 columns: Visitor has proven: 3G, Immunization (fully vaccinated, recovered), Test result (tested negative).

I hereby confirm that I have reviewed the questionnaire, I will only grant access if the required regulations can be met* and that the information sheet Rules of Conduct CORONA has been handed out.

..... Name Signature

*Should a question be answered with YES, access is only possible on a restricted basis and/or under special conditions. The responsible Siempelkamp employee ensures that the necessary measures are taken to minimize the risk of infection for the persons involved.