



COUNTY OF LAKE

LOCAL RETAILER/BUSINESS OWNER SELF-CERTIFICATION FORM

SOCIAL DISTANCING PROTOCOL COMPLIANCE

I, _____ hereby certify that I am the owner of the following business in the County of Lake and have the sole legal authority necessary to bind this business to the requirements of this Self-Certification Form:

Name of Business

Business Address

I hereby declare under penalty of perjury under the laws of the State of California that the following is true and correct:

1. I have reviewed and understand the terms and conditions of the Social Distancing Protocol for my business, attached hereto and incorporated herein by reference as Appendix "A".
2. I have implemented all terms and conditions for the reopening of my business described in Appendix "A" and I shall continue to do so for the extent of the COVID-19 public health emergency, unless or until these protocols are modified or determined by the County Health Officer to no longer be necessary.
3. In addition to my compliance, I shall ensure compliance with the terms and conditions of Appendix "A" by any and all employees and/or patrons of my business.
4. I shall also adhere to and remain in compliance with all state and local laws, including but not limited to the Executive Orders of the Governor issued consequent to the COVID-19 emergency.
5. I understand that my failure to comply with the terms and conditions of Appendix "A" is and shall be deemed to be a direct and willful violation of State and local public health orders and may result in the closure of my business during the length of the COVID-19 emergency by the County Health Officer and may also subject me to criminal and civil penalties.

Note: Attach this certification form to Appendix A: Social Distancing Protocol. These forms **MUST** be posted near each entrance to your place of business and must be readily visible to the public.

Signature

Date