

Customer Information Record Form

[The completed form is to be kept on the premises by the responsible person of the premises for 31 days for checking]

Please note that:

- 1. Pursuant to the directions issued by the Secretary for Food and Health (SFH) under the Prevention and Control of Disease (Requirements and Directions) (Business and Premises) Regulation (Cap. 599F) (the Regulation), all customers/users must scan the “LeaveHomeSafe” venue QR code using the “LeaveHomeSafe” mobile application before entering this premises. Customers/users who are eligible not to do so have to provide this duly completed form to the responsible person of the premises. This is abbreviated hereinafter as “relevant directions”.**
- 2. Under the relevant directions, the responsible person of the premises is liable to inspect whether this form as provided by a customer/user is duly completed, and keep the form on the premises for 31 days for checking by law enforcement officers.**
- 3. Under the Regulation, if the customer/user provides false or incorrect information under the above measures, that would be regarded as non-compliance with the directions issued under Cap. 599F and would be subject to a fixed penalty of \$5,000.**

Particulars of customer/user

| | |
|-----------------|--|
| Name: | |
| Contact number: | |
| Date of visit: | |
| Time of visit: | |

I am fully aware of the relevant directions made by the Secretary for Food and Health under Cap. 599F, and confirm to the responsible person of the premises that I am aged 15 or below and not accompanied by an adult; or aged 65 or above; or a person with disability; or other persons recognized by the Government or organization(s) authorized by the Government as eligible for the above arrangement.

Signature: _____

Date: _____

Purposes of collecting personal data:

The information provided by you will only be used to facilitate the work of the Government in controlling the spread of COVID-19 and for related purposes. Only persons authorised by this premises will have access to such information for the aforesaid purposes. For the purposes of epidemiological investigation, contact tracing, and investigation and prosecution in relation to breaches of the relevant legislation, where necessary, the information supplied by you may be provided to the Government/other organisations/associations/persons, such as the Department of Health (including the Centre for Health Protection), the Hospital Authority and authorised law enforcement officers. This premises will ensure that the personal data provided by you will be destroyed after 31 days. If you wish to amend or access the personal information provided, please contact Mr/Ms _____ at _____. It is the premises' right to deny your entry should you fail to provide the required personal information.