DAVID Y. IGE GOVERNOR OF HAWAII



KENNETH S. HARA DIRECTOR

STATE OF HAWAII HAWAII EMERGENCY MANAGEMENT AGENCY 3949 DIAMOND HEAD ROAD HONOLULU, HI 96816

ORDER FOR SELF-QUARANTINE

On March 4, 2020, the Governor of the State of Hawai'i proclaimed a state of emergency in response to the COVID-19 pandemic, and on March 13, 2020, the President of the United States of America declared a national emergency. As part of the effort to contain the spread of COVID-19, on March 31, 2020, the Governor ordered all persons traveling to and between islands in the State of Hawai'i to self-quarantine and has adopted Rules Relating to COVID-19.

Pursuant to the Governor's proclamation and the Rules Relating to COVID-19, the Director of the Hawai'i Emergency Management Agency (HIEMA) hereby orders you to comply with the following:

1. Truthfully, accurately and fully complete, authenticate and sign the Mandatory Travel Declaration Form or the Mandatory State of Hawai'i Travel and Health Form, including the "Destination Location" section of the form. The address you designate to the Director of Emergency Management as your "Destination Location" on the Mandatory Travel Declaration Form or the Mandatory State of Hawai'i Travel and Health Form, will be recognized as your designated quarantine location.

(initial)

- 2. Proceed directly from the airport to your designated quarantine location, which is the location identified and affirmed by you in the "Destination Location" section of the Mandatory Travel Declaration Form or the Mandatory State of Hawai'i Travel and Health form.
 - a. If you are a resident, your designated quarantine location is your residence.
 - b. If you are a visitor, your designated quarantine location is your hotel room or rented lodging.

(initial)

- 3. Remain in your designated quarantine location for a period of 14 days or the duration of your stay in the State of Hawai'i, whichever is shorter.
 - a. You may leave your designated quarantine location only for medical emergencies or to seek medical care.

(initial)

4. Do not visit any public spaces, including but not limited to pools, meeting rooms, fitness centers or restaurants.

(initial)

5. Do not allow visitors in or out of your designated quarantine location other than a physician, healthcare provider, or individual authorized to enter the designated quarantine location by the Director of HIEMA.

(initial)

6. Comply with any and all rules or protocols related to your quarantine as set forth by your hotel or rented lodging.

(initial)

The knowing and intentional failure to follow any part of this order constitutes a criminal offense punishable by a fine of not more than \$5,000, or imprisonment of not more than one year, or both.

You will be subject to random quarantine compliance checks throughout your period of selfquarantine. Quarantine compliance checks may be conducted without further notice, either by telephone at the number(s) you provided in the "Contact Telephone in Hawai'i" section of the Mandatory Travel Declaration Form or the Mandatory State of Hawai'i Travel and Health Form, and/or in person at the address you provided in the Destination Location section of the Mandatory Travel Declaration Form or the Mandatory State of Hawai'i Travel and Health Form, or both.

I, _____, declare under penalty of law that I have received, read

and understood the above Order for Self-Quarantine, and that all information provided herein and on

the Mandatory Travel Declaration Form or the Mandatory State of Hawai'i Travel and Health Form is

true and accurate, including but not limited to the information I provided pursuant to paragraph 1,

above, including my designated quarantine location and telephone number.

(Print Name)

Unique Government ID Number (for example, Driver's License Number)

(Signature)

(date)

Witnessed by ______, on ____, on _____,

(date)

(Screener Signature)

Screener AOA or Company Number