



**NATIONAL EMERGENCY MANAGEMENT ORGANISATION (NEMO)
 MINISTRY OF NATIONAL SECURITY
 ST. VINCENT AND THE GRENADINES
 WEST INDIES**

Tel: 784-456-2975, Fax: 784-457-1691, Email: nemosvgeoc@gmail.com or nemosvg@gov.vc

**HEALTH SERVICES SUBCOMMITTEE
 APPLICATION FOR QUARANTINE ONBOARD YACHT**

All applications MUST be submitted at least five (5) days prior to date of travel.

Submit application form via email to: coronavirustaskforcesvg@gmail.com. Your vessel may also be subject to verification inspections on succeeding days to ensure continued compliance with quarantine instructions. This form must be submitted prior to arrival or on arrival at port of entry.

Date (DD-MM-YYYY)

Please answer all questions

Passenger Information		
1. Name of Passengers	14 days Travel History	Date of Birth
2. Flight Arrival Number and Date		
3. Length of Stay		
4. Number of Crew/Passengers already onboard vessel prior to arrival :		
5. Number of Passengers requesting quarantine onboard yacht :		
6. Number of Passengers requesting quarantine in approved hotel:		

This form may be revised at any time at the discretion of the Health Services Subcommittee of the National Emergency Committee/COVID-19 Task Force, Ministry of Health, Wellness and the Environment.

Vessel Information	
7. Vessel Name	
8. Size of Vessel	
9. Number of Cabins	
10. Date Requested for Boarding	
11. Location of Yacht for Boarding	

Health Information	
12. Have any of the passengers on board had a fever anytime during the last 14 days?	
13. Do any passengers currently feel ill?	
14. Currently do any passengers on board have any of the following?	
• Cough	
• Fever	
• Shortness of Breath	

Comments:

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OFFICIAL USE ONLY

Approved for Quarantine on Land

Approved for Quarantine on Vessel

Not Approved

Comments:

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