I, _____

(insert name, address and position / role)

have read the Exposed Port Worker (Restrictions on Access) Directions made under the Public Health Act 2016 (WA) (**Directions**) and the Harbour Master direction of the Kimberley Port Authority and make the following declaration pursuant to the Directions.

I declare that:

1. I am authorised to make this declaration on behalf of

   _____

   (insert name of employer/person in charge)

2. The business has taken all reasonable and lawful steps to:

   (a) Identify every employee or person it is in charge of who is a port worker; and

   (b) Collect and maintain a record of vaccination status of each port worker that it employs or is in charge of.

3. It is strongly recommended that you complete the attached table which summarises all of the Port workers the Business employs or is in charge of and who work in the Kimberley Port Authority's Port of Broome wharf and their vaccination status.
4. It is also recommended an updated table will be provided to Kimberley Ports Authority as soon as there are any changes to the list of port workers who the Business employs or is in charge of.
5. Kimberley Ports Authority will retain this register in a confidential site for each port

6. I believe that the statements in this declaration are true.

Declared at (insert place) _____

_____ _____

Signature Date

_____ _____

Witness Signature Date

KIMBERLEY PORTS AUTHORITY *Broome Port Services*	**COVID-19 DECLARATION – EXPOSED PORT WORKER DECLARATION REGISTER**	File ref: MAR93/ Version: 1.1 / 192414 Issue date: January 2022

Employer	First name	Last name	D.O.B	Date of vaccination 1	Date of vaccination 2	Date of vaccination booster	Evidence of vaccination status	Category of exposed port worker	Exemption type (if applicable)	Date exemption expires