

Dear Partners,

Reference the above subject, In addition to our previous travel advisory (booking for DXB bound passengers), further emphasize on mandatory procedures/steps, while booking for DXB bound passengers.

Please comply with the following steps as a mandatory before making any booking or selling a tickets:

1. Please first of all, Ask for GDRF / ICA approval. If okay,
2. Then, Check the visa status of concern pax through UAEEntry.ica.gov.ae<<https://email.bdbiman.com/owa/UAEEntry.ica.gov.ae>>, whether it is colored Green,
3. If passenger status is affirmative in all aspect, then Go for Booking/sale.

[N.B: Otherwise please do not make any reservation).

After Reservation: Please convey the passenger to be adherent strictly with all these followings:

4. Once Booking is made, please provide the "Declaration Form" to the Pax in hard copy (attached herewith).
(which is to be filled up & submit after arrival before PCR test at Dubai)
5. Advise passenger to download "Covid-19 DXB" smart app before departure.
6. Simultaneously, convey that the passenger must report with a smart phone (Android or any types) at the time of departure in which "Covid-19 DXB" smart app installed readily.
7. Convey pax to Print Negative COVID-19 Certificate (02)copies. PCR test no later than 72 hours before departure.
8. Ask for "Valid Health Insurance". Passenger must report with "Valid Health Insurance" at the time of departure.

All are hereby requested to follow all these mandatory steps before making any reservation & convey all these relevant information to the passenger that they must be adherent with.

Health Declaration Form

To protect your health, public health officers need you to complete this form. Your information would help public health officers to contact you if you were exposed to a communicable disease. It is important to fill out this form completely and accurately. Your information is intended to be held in accordance with applicable laws and used only for public health purposes.

FirstName:	Surname:	Nationality:	Gender:
Emirates ID/Passport No.:	Date of Flight:	Flight Number:	Seat Number:
Airport of Departure:	Final Destination:	Contact Number:	Second Contact Number:
Address in the UAE Emirate of residence:	Area and street:	Hotel name or villa/flat number:	

1. Have you been diagnosed as COVID-19 (Novel Coronavirus) patient? if yes when:.....
2. Did you, in the past 14 days, come in close contact with someone who has been diagnosed with COVID-19? Yes/No
3. Have you had any fever or respiratory symptoms "coughing, sneezing, trouble breathing" in the past 3 days? Yes/No
4. Do you have health insurance valid in the UAE? Yes/No
5. Have you travelled to any other country in last 14 days? If yes please specify.....

"I hereby declare that I am fit to travel and confirm that I have filled the information required accurately and I have carefully considered the statements made above and that to the best of my knowledge are complete, correct and that I have not withheld any relevant medical information or made any misleading statements. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.

Name: _____ **Signature:** _____ **Date:** _____