

IZJAVA O IZPOLNJEVANJU POGOJA PREBOLELOSTI – CEPLJENJA – TESTIRANJA (POGOJ PCT)

Podpisani/a _____, ki bivam v nastanitvenem obratu _____ v času od _____ do _____ izjavljam, da izpolnjujem enega od zahtevanih pogojev PCT.

Na podlagi Odloka o začasni prepovedi ponujanja in prodajanja blaga in storitev potrošnikom v Republiki Sloveniji lahko v nastanitvenih obratih bivajo le osebe, ki imajo ob prijavi:

- dokazilo o **negativnem rezultatu testa** na virus SARS-CoV-2 s testom PCR ali testom HAG, ki ni starejši od 48 ur od odvzema brisa;
- **dokazilo o cepljenju** zoper COVID-19, s katerim dokazujejo, da je od prejema:
 - drugega odmerka cepiva Comirnaty proizvajalca Biontech/Pfizer preteklo najmanj sedem dni,
 - COVID-19 Vaccine proizvajalca Moderna preteklo najmanj 14 dni,
 - Sputnik V proizvajalca Russia's Gamaleya National Centre of Epidemiology and Microbiology preteklo najmanj 14 dni,
 - CoronaVac proizvajalca Sinovac Biotech najmanj 14 dni ali COVID-19 Vaccine proizvajalca Sinopharm preteklo najmanj 14 dni,
 - prvega odmerka cepiva Vaxzevria (COVID-19 Vaccine) proizvajalca AstraZeneca ali Covishield proizvajalca Serum Institute of India/AstraZeneca preteklo najmanj 21 dni,
 - odmerka cepiva COVID-19 Vaccine Janssen proizvajalca Johnson in Johnson/Janssen-Cilag preteklo najmanj 14 dni;
- **dokazilo o pozitivnem rezultatu testa PCR**, ki je starejši od 10 dni, razen, če zdravnik presodi drugače, vendar ni starejši od šest mesecev, ali
- **potrdilo zdravnika, da so prebolele COVID-19** in od začetka simptomov ni minilo več kot šest mesecev, ali
- **dokazila o pozitivnem rezultatu testa PCR**, ki je starejši od 10 dni, razen, če zdravnik presodi drugače, vendar ni starejši od šest mesecev, ali potrdilo zdravnika, da so prebolele COVID-19 in od začetka simptomov ni minilo več kot šest mesecev, **in so se** v obdobju, ki ni daljše od osmih mesecev od pozitivnega rezultata testa PCR oziroma od začetka simptomov, **cepile** z enim od z odlokom priznanih cepiv, pri čemer v primeru cepiv (Comirnaty proizvajalca Biontech/Pfizer, COVID-19 Vaccine proizvajalca Moderna, Sputnik V proizvajalca Russia's Gamaleya National Centre of Epidemiology and Microbiology, CoronaVac proizvajalca Sinovac Biotech, COVID-19 Vaccine proizvajalca Sinopharm, Vaxzevria (COVID-19 Vaccine) proizvajalca AstraZeneca ali cepiva Covishield proizvajalca Serum Institute of India/AstraZeneca), zadostuje en odmerek. Zaščita se vzpostavi z dnem cepljenja.

Datum: _____

Podpis: _____

STATEMENT OF COMPLIANCE WITH RVT CONDITION (RECOVERED – VACCINATED – TESTED)

_____ (guest's name), staying in the accommodation _____ from _____ to _____, I affirm that I meet one of the required RVT conditions.

Guests can stay at an accommodation facility provided they can present at least one of the following at the check-in (**RVT condition: Recovered – Vaccinated – Tested**):

- a **certificate of a negative SARS-CoV-2 virus test result by a PCR or HAG test** not older than 48 hours after swab collection
- **certificate of positive result of a PCR test** that is older than 10 days and not older than six months, or medical certificate of recovery from COVID-19, if not more than six months have elapsed since the beginning of symptoms.
- **certificate of vaccination against COVID-19**, which proves that:
 - at least seven days have passed since the second dose of the **Comirnaty vaccine by Biontech/Pfizer**,
 - at least 14 days have passed since the second dose of the **COVID-19 Vaccine by Moderna**,
 - at least 21 days have passed since the first dose of the **Vaxzevria (COVID-19 Vaccine) by AstraZeneca**,
 - at least 14 days have passed since the first dose of the **COVID-19 Vaccine Janssen by Johnson & Johnson/Janssen-Cilag**,
 - at least 21 days have passed since the first dose of the **Covishield vaccine by Serum Institute of India/AstraZeneca**,
 - at least 14 days have passed since the second dose of the **Sputnik V vaccine by Russia's Gamaleya National Centre of Epidemiology and Microbiology**,
 - at least 14 days have passed since the second dose of the **CoronaVac vaccine by Sinovac Biotech**, or
 - at least 14 days have passed since the second dose of the **COVID-19 Vaccine by Sinopharm**
- **certificate of positive result of a PCR test** that is older than 10 days and not older than six months, or medical certificate of recovery from COVID-19, if not more than six months have elapsed since the beginning of symptoms and **have been vaccinated** in the period which does not exceed eight months from the positive PCR test or the beginning of symptoms with one of the following vaccines (Comirnaty vaccine by Biontech/Pfizer, COVID-19 Vaccine by Moderna, Sputnik V vaccine by Russia's Gamaleya National Centre of Epidemiology and Microbiology, CoronaVac vaccine by Sinovac Biotech, COVID-19 Vaccine by Sinopharm, Vaxzevria (COVID-19 Vaccine) by AstraZeneca or Covishield vaccine by Serum Institute of India/AstraZeneca).

Date: _____

Signature: _____