



CITY OF ADAK, ALASKA

P.O. Box 2011, Adak, Alaska 99546-2011
Phone: (907) 592-4500; Fax: (907) 592-4262
www.adak-ak.us

TRAVEL APPLICATION

Essential Services, Critical Workforce, Resident, Media, General Request

Each person seeking to enter the municipality by sea or air must fill out an application, regardless of age or whether an employer has filed a plan or protocol with the State of Alaska. EXCEPTION – For fishing vessels with multiple employees, a supervisor or captain may list all employees under one form and only submit one form to cover all employees on the vessel. Attachment A allows for listing multiple names. The person filling out the application on behalf of a vessel should fill out all other portions of this form. Applications should be submitted at least two business days prior to travel. Blank areas on the application will result in processing delays. Applicants should contact the City office prior to submission if there are any questions. Nothing on this application supersedes the requirements/definitions set out in Emergency Ordinance 20-2020-117.

Full Name: _____

Business/Vessel Name: _____

Permanent Address: _____

City: _____ State: _____ Zip: _____

Phone No.: _____ E-mail: _____

Occupation: _____ Employer: _____

Transportation provider used to travel to Adak: _____

Dates of Travel to & from Adak: _____

Please list the specific communities & airports you have been to, including your home community, travelled within the previous 14 days of travel to Adak.

- 1. _____ 2. _____
- 3. _____ 4. _____

Please explain the plan that you (or your employer has arranged for you) for the following:

- a. Where will you self-quarantine upon arrival (when not performing essential duties as applicable)? Do not list “hotel”, list specific lodging operator. How will you obtain essential goods and services?

- b. How do you (or your business) intend to quarantine symptomatic while in Adak? _____

- c. Do you have air ambulance (medical evacuation) insurance? If so, through whom? If not, how will you be evacuated if necessary as commercial air transportation may be unavailable?

REASON FOR TRAVEL

Non-essential travel is currently not permitted into Adak, with limited exceptions as defined in Emergency Ordinance 20-2020-117, § 3. Your selection will be audited and additional materials may be requested to substantiate your request. Contracted service providers must have an active and current City business license. **Check below only one exception which applies to you:**

- Emergency first responder or law enforcement officer acting within official duties.
- Office of Children’s Services personnel responding to reports of abuse and neglect
- Essential Government Services Personnel needed to ensure the continuing operations of government agencies to provide for the health, safety, and welfare of the public. **Provide proof of Essential Travel Status.**
- Persons engaged in subsistence fishing and the commercial fishing industry including fisherman, processors, transporters of fish and those providing contract services to fishermen, processors and transporters related to maintenance and operation of commercial fishing vessels and processing facilities. **Provide verifiable documentation.**
- Essential Services & Critical Workforce: Healthcare Operations & Public Health.
- Essential Services & Critical Workforce: Telecommunications
- Essential Services & Critical Workforce: Utility Operations and Maintenance
- Essential Services & Critical Workforce: Air Transportation/Logistics.
- Essential Services & Critical Workforce: Plumbers, electricians, mechanics and other service providers who provide services that are necessary to maintain the safety, sanitation and essential operation of residences, transportation, and commercial fishing infrastructure. **Must have a city business license.**
- Essential Services & Critical Workforce: Supply of fuel (including heating oil, diesel fuel, aviation fuel, propane and gasoline)
- Children of essential workers if no reasonable alternative childcare is feasible. **A custody order may be required to demonstrate that another parent or guardian cannot provide a reasonable alternative to a child traveling to Adak.**
- Resident returning to Adak (as explicitly defined in EO 20-2020-117 §4). **Provide 2020 Alaska PFD Application with Adak physical address.**
- Immediate family member of Adak resident (as explicitly defined in EO 20-2020-117 §4). Immediate family member means: spouse, child, sibling, parent, grandparent, grandchild, stepparent, stepchild, or stepsibling. **Provide 2020 Alaska PFD Application with Adak physical address of the related Adak resident.**
- Family members of teachers or school district staff who normally live with the teacher or staff member, provided the teacher or staff member intends to become a permanent employee in Adak.
- Employees of newspapers, television, radio and other media services.
- I do not fit one of the exceptions, but I am requesting permission to travel to Adak (describe below in detail)

Please explain the reason for your travel to Adak to ensure compliance with City Ordinances and State Mandates.

AGREEMENT TO FOLLOW COMMUNITY SAFETY LAWS

Initial the following acknowledging your agreement to adhere to local laws.

___ I agree to self-screen for symptoms of COVID-19 a minimum of 48 hours prior to travel to Adak.

___ I agree to not travel to Adak if symptomatic. You may be denied transport on or off the island if presenting symptoms.

___ I agree to wear face coverings as recommended in Health Alert 010 issued April 3, 2020, further required in accordance with City Emergency Ordinance 20-2020-117, when outside personal lodgings and in entering business

establishments in Adak.

____ I agree to follow all other local ordinances or emergency orders that are in place or may be in the future.

____ I will complete a 14-day quarantine (or length of stay if less than 14 days), when not performing essential duties. I acknowledge quarantine means zero interaction with members of the community, including but not limited to other residents, going to the Post Office, City Office, School, Store, Liquor Store, Bar or Restaurant and Airport terminal (except to depart), except to perform my essential duties. Essential businesses do not include the Store, Liquor Store, Bar or Restaurant.

____ I agree not to enter residences in Adak other than my own lodging.

____ I acknowledge and understand that Adak has limited primary and emergency medical services and capabilities. I understand that I may not be able to receive the level of care that may be available in a larger city/community.

____ I acknowledge that if travelling as an immediate family member of a resident that the entire household, even if not having travelled, must quarantine for 14 days.

Certificate: Read and Sign: I swear or affirm, under penalty of perjury, that: the above information on this document is true and correct. **WARNING:** If you provide false information on this form, you may be convicted of a Class B felony under AS 11.56.200 and/or a Class A misdemeanor under AS 11.56.210. Additionally, due to the imminent danger to the public by the spread of Coronavirus, if you violate the self-quarantine regulations set forth in the mandate, you may also be convicted as a class A misdemeanor which is punishable by a fine of up to \$25,000 or imprisonment of not more than one year, or both pursuant to Alaska Statute 12.55.135. You may also be cited for a minor offense under local ordinance and subject to a \$500 fine.

SIGNATURE: _____ DATE: _____

*****For City of Adak Use Only*****

Approved: _____ Denied: _____

CITY MANAGER SIGNATURE: _____ DATE: _____

ADDITIONAL NOTATION OR DENIED BY THE CITY MANAGER FOR FOLLOWING REASONS:

CITY OF ADAK MAYOR'S REVIEW

MAYOR SIGNATURE: _____ DATE: _____

Approved: _____ Denied: _____

THE MAYOR'S DECISION ON APPEAL SHALL BE THE FINAL CITY ACTION ON THE APPLICATION.