

Annex 9 – Facilitation

Appendix 13: Public Health Passenger Locator Form (PLF)

Guidelines on Completing the PLF

These Guidelines have been developed as guidance material for end-users of the PLF. They are intended to be printed by public health authorities in Member States and/or by aircraft operators for distribution to passengers who may have been exposed to an individual suffering from a communicable disease and consequently may need to be contacted at a future date.

- **The Information you provide is confidential and will only be used in case of a public health event.**
- Complete one form per family. Write legibly.
- Use capital (uppercase) letters. Use only one character in each box.
- **Questions 1-4:** Airline name, flight number, your seat identifier (row number and letter), and your arrival date (yyyy/mm/dd).
- **Questions 5-8:** Print your family (last) name, your given (first) name, the first letter of your second (middle) name, and check the appropriate box for male or female.
- **Questions 9-12:** Provide home, business, mobile and/or other telephone numbers (as many as possible). Include country and city codes.
- **Question 13:** Your email address, if you have one.
- **Questions 14-19:** Your permanent home address (where you live most of the year): house/building number and street name (separate the number and street name with a blank box), apartment number (if applicable), city or town, state or province, country, and postal or zip code.
- **Questions 20-26:** If you are visiting, or residing at an address other than your permanent address (e.g. in a hotel or at a private residence), provide the complete details regarding your temporary address (the first address, if you will be staying in more than one place).
- **Questions 27-33:** Name of person who can be contacted in the event of an emergency: Family (last) name, given (first) name, city or town, country, email address, home, business and mobile phone number. Include country code and town/city code.
- **Question 34:** Name, seat identifier, (row number and letter) and age (if under 18 years) of family members that are traveling with you.
- **Question 35:** Name of any non-family member travel companions, or, if you are travelling with a group, name of group.

— END —