



New York Forward Business Reopening Self-assessment and Affirmation of Compliance for the City of Glens Falls

Name of Business: _____

Business Address: _____

Owner/Manager: _____

Business Phone Number: _____

Business Owner Manager Affirmation:

- YES**, we have used the Official New York Forward Business Reopening Lookup Tool, and we are cleared to be open.

[here is the link to the system where they can put in their NAICS Code and obtain verification: <https://www.businessexpress.ny.gov/app/nyforward>]

- YES**, we have read and affirmed the Official NYS DOH Guidance on how to operate our business during the COVID-19 Public Health Emergency.

[guidance documents can be found and reviewed at <https://forward.ny.gov/industries-reopening-phase>, and the affirmation link is: <https://forms.ny.gov/s3/ny-forward-affirmation>]

- YES**, we have authored and will follow a written Safety Plan outlining how we will prevent the spread of COVID-19, and our Safety Plan is available for inspection by State and Local public health and public safety officials.

[an optional Safety Plan template is available here: https://www.governor.ny.gov/sites/governor.ny.gov/files/atoms/files/NYS_BusinessReopeningSafetyPlanTemplate.pdf]

I hereby certify that our business has completed the necessary assessments and established the required plans and procedures to comply with reopening our business as stated by this affirmation of compliance.

Date: _____

Signature: _____

A completed copy of this form must be posted at every entrance used by the public.