

COVID Management Plan AMENDMENT FORM

Section 1: Guidance

This amendment form must be used to notify SA Health when you wish to make changes to your COVID Management Plan. Please note that you are required to resubmit your COVID Management Plan, which includes the updates you wish to submit for approval, as well as this amendment form.

Section 2: COVID Management Plan Information

Please provide the registered company name and trading name as recorded on your Plan to ensure this amendment form can be matched to the updated COVID Management Plan.

Registered company/ business name	
Trading company/ business name	

Section 3: Reason for submitting a COVID Management Plan Amendment

Please tick the reason/s you are submitting a COVID Management Plan Amendment:

- An update to the administrative section of the plan (e.g. Applicant Name, Business Name, ABN Number etc.)
- A change to the date and/or time of the event
- A change to the Plan is required due to a new Emergency Management Direction
- Other, Please explain:

Section 4: Amendment Summary

Please use the table below to outline the changes you have made to your resubmitted COVID Management Plan.

Section	Summary of Change
1 <i>(example)</i>	Decreased capacity to 1,500 in light of change to density requirements as per the new Emergency Management Direction in place from 1 st December <i>(example)</i>

Section 5: Declaration

- I have supplied the following information to outline how I will ensure that patrons/attendees, volunteers, and staff safety will be maintained during the course of business. I will implement these measures to ensure my operations are COVID Safe to reduce the risk of transmission of COVID-19.
- I have provided an updated COVID Management Plan to be considered with this amendment form.

Full name and position title	
Signature	

For more information

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Health Regulation and Protection
 Department for Health and Wellbeing
 SA Health, Government of South Australia

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SA Health