



Office of the Bergen County Sheriff

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www.bcsd.us

Anthony Cureton

Sheriff

FORECLOSURE SALE CLEARANCE FORM

DATE:

FULL NAME

ADDRESS:

PHONE#: (CELL)

(HOME/WORK)

1. Do you have any of the following symptoms?

• FEVER	• COUGH
• DIFFICULTY BREATHING	• CHILLS/REPEATED SHAKING
• MUSCLE PAIN/BODY ACHES	• FATIGUE
• HEADACHES	• SORE THROAT
• LOSS OF TASTE OR SMELL	• VOMITING
• DIARRHEA	

Yes

No

2. In the past 14 days, have you been in contact with:

• Any person demonstrating the above symptoms?
• Any person that has tested positive for COVID-19?
• Any person under medical care for COVID-19?

Yes

No

3. Have you traveled outside of the United States in the last 14 days?

Yes

No

EXPRESS ASSUMPTION OF RISKS-COVID-19. I acknowledge the contagious nature of the SARS-CoV-2 virus (the “novel coronavirus”) and voluntarily assume the risk that I, on behalf of myself, and, if applicable, any minor in my care, may be exposed to or infected by the novel coronavirus by my presence at or participation in activities on the premises of the Bergen County Sheriff’s Office or County of Bergen property being utilized by the Bergen County Sheriff’s Office (the “Premises”), and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to the novel coronavirus or persons with the COVID-19 disease at the Premises may result from the actions, omissions, or negligence of myself and others, including, but not limited to other patrons, employees or persons at the Premises. I voluntarily assume the risk that I, on behalf of myself, and, if applicable, any minor person in my care, may be exposed to the novel coronavirus or persons with the COVID-19 disease as a result of presence at or participation in activities at the Premises. I FREELY ACKNOWLEDGE, ACCEPT AND FULLY ASSUME ALL SUCH RISKS, DANGERS AND HAZARDS AND THE POSSIBILITY OF PERSONAL INJURY, DEATH, DISEASE, PROPERTY DAMAGE AND LOSS RESULTING THEREFROM AND EXPRESSLY RELEASE AND HOLD HARMLESS THE COUNTY OF BERGEN, BERGEN COUNTY SHERIFF’S OFFICE, AND EACH OF THEIR OFFICERS AND EMPLOYEES FROM ANY LIABILITY, CLAIMS, OR DAMAGES ARISING THEREFROM.

SIGNATURE

DATE

Please Download Sign-In Form, print and bring with you !!