

Permit to Travel to and From a Restricted Area in terms of Regulation 6(5) of the State of Emergency Regulations published in Gazette No. 7159 of 28 March 2020

Name and Surname	Identity No.
Residential Address	Postal Address
Design and Disc	Constitution
Region and Place	Constituency
Date of Travel	Date of Return
Travel from:	Traveling To:
Reason for Travel:	
Reason for Travel:	
Number of Persons travelling in same Motor Vehicle (If persons in same Motor Vehicle is permitted to exceed five (5),	
please indicate names on a separate page)	
1.	
2.	
3.	
4.	
5.	
	Date:
Signature:	Date:
FOR OFFICAL PURPOSES	
APPROVED/NOT APPROVED	Official Stamp:
REASONS:	
REASOINS:	
Name of Authorised Officer:	Date:
Signature:	