

VISA APPLICATION STATEMENT LETTER FOR ALL FOREIGN CITIZENS

I the undersigned,

Name :

Sex :

Place and date of birth :

Nationality :

Passport Number :

Expiry date :

Hereby declare that (*) :

1. Have obtained health certificate issued by health authority in Japan, stating fit to travel and free from respiratory illness (eg. fever, cough, sore throat, shortness of breath, and runny nose);
2. Fully consent and voluntarily to be quarantined for 14 (fourteen) days conducted by the Indonesian Authority whenever advised by the Indonesian Government.
3. Fully consent to do a mandatory self-isolation or undertake a medical treatment at an accommodation or a designated health facility by the Indonesian government at the traveler's own expense when a PCR check upon arrival by the health authority at ports of entry results in a positive with the Covid-19 or with symptoms in accordance with the health protocol and provisions of law and regulations.

(*) **Article 4.2 Ministry of Law and Human Rights Regulation No.8/2020**

This statement is made truthfully and to be used accordingly.

Japan, 2020

Signature & stamp