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MENDOCINO COUNTY ENVIRONMENTAL HEALTH

COVID19 SELF-CERTIFICATION FORM

Business Type:	Restaurants / ACATION RENTALS		
Business Name:	ANTIOCH RANCH		
Business License #:	124614		
Business Owner Name First: Last:	JERRY + PATRICIA WESTFALL		
Business Owner Phone:	707-937-5570		
Business Website (optional):			
Business Address Street: City: State / Zip	39451 COMPTCHE UL MENDOCINO, CA 95460		
All individuals (and businesses) must follow County and State Health Officer orders which are issued under the authority of California law. As a condition of re-opening, current orders +15105043284 require, among other things, local business compliance with state and local industry-specific guidance and submission of self-certification forms. State Statute explicitly provides that Health Officer orders may be enforced by the local sheriff or other peace officers of the County. Violation of the Orders may subject a person or business to criminal or civil penalties, as well as other legal consequences. In particular, any business that violates the Health Officer's orders risks committing negligence per se, may expose itself to civil liability for all damages created by any viral transmission that occurs at their place of business. * I read and understand the foregoing.			
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Minimizing In-Person In		[Nel	
Encourages employees to work in the workplace when feasible	remotely to promote social distancing	Yes No N/A	
Re-engineered/restructured op distancing	erations to provide for six feet	Yes No	



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When feasible products and services are offered online	Yes
	No
	X N/A
When products or services cannot be offered online, physical contact	Yes
is limited between employees and customers	No
	≥ N/A
The number of people allowed in a business at a given time has been	✓ Yes
limited	No
	N/A
Daily Monitoring of Employee Health Requirements	
Employee's temperature is verified to be below 100.0 degrees	Yes
Fahrenheit	No
	X N/A
Employees are required to conduct self-assessments using an online	× Yes
tool such as https://www.mayoclinic.org/covid-19-self-assessment-	No
<u>tool</u>	N/A
Implementation of personal protective equipment such as gloves,	Yes
masks and other protective measures deemed appropriate for the	No
nature of the business operations	N/A
nature of the business operations	I IV/A
Safe Business Practices Requirement	
	✓ Yes
COVID-19 mitigation plans and protocols	No
	N/A
Makes available to all employees hand sanitizer and other sanitation	✓ Yes
products for the frequent cleaning of employee and customer work	No
spaces	N/A
Wines down doors handles and sufference to the state of t	
Wipes down doors, handles, and surfaces on a very frequent basis and between customers	Yes No
DELIVEER CUSTOMERS	I I INU



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		N/A
Provides training to employees on COVID-19 mitigation measures for		× Yes
customer-facing activities (e.g. cleaning and sanitizing standards, etc.)		No
		N/A
Signature:	Jerry a. Westfull	
	0	
Date:	6/18/2020	

Mail this completed certification form (with any required attachments) to: County of Mendocino Environmental Health, 860 N. Bush Street, Ukiah, CA 95482

ANTIOCH RANCH REOPENING PLAN

- 1. No more than 3 weekends/month with a 48-72 hour separation between guests
- 2. One family/house
- 3. Guests bring their own face masks
- 4. We supply hand sanitizers
- 5. We wash all dishes, silverware, etc. with hot water and soap.
- 6. We provide dish soap, new sponge
- 7. We clean all appliances, door knobs, door handles, light switches with ADA approved sanitizers
- 8. We supply freshly washed bed and kitchen and bath linens
- 9. We supply hand soap, toilet paper, paper towels, disinfecting spray
- 10. Housekeepers to wear disposable gloves
- 11. Signage will request all guests to wear masks, maintain 6 foot social distancing when beyond their social bubble and wash hands frequently.
- 12. We will clean and disinfect all counters, railings and all bathroom facilities, and fixtures.
- 13. All brochures, magazines, guest books, etc. will remain cleared from rooms