

WEBEQUIE FIRST NATION

P.O Box 268

Webequie, ON P0T 3A0

**APPROVAL TO TRAVEL ON THE WINTER ROAD**

To Whom It May Concern:

Chief and Council of Webequie First Nation hereby authorize;

|  |  |
| --- | --- |
| Name of Traveler(s) |  |
| Contact Phone # |  |
| Purpose of Travel |  |
| Estimated Date(s) of Travel |  |
| Destination (WEBEQUIE) | * Webequie * Pick-Up a Vehicle – at the 808 Check-point * Drop-Off a Vehicle – at the 808 Check-point |
| Proof of Vaccination | List of Names # of Doses |
| PCR TEST RESULTS | **MUST BE 72 HRS PRIOR TO TRAVEL, HAVE A PRINTED COPY ON HAND OR ON YOUR PHONE FOR PROOF.** |

Should there be any questions or concerns about this individual’s travel please contact me as per below.

**IMPORTANT:**

* **Vehicle must be sanitized before being handed over to anyone returning to the community on the winter road. Absolutely NO interaction is permitted during exchange. Exchange must be done at the 808 check-point site ONLY**
* **Show this SIGNED form at 808 check-point as proof of entry (one form per vehicle with a list of passengers)**

Authorized By:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Title

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

**Tyler Shewaybick – 807.633.6180**

**\*Anyone without a signed form will be denied entry\***