



TEAM Tioga COVID-19 Business and Workplace ReOpening Plan

Business Name: _____ Owner Name: _____

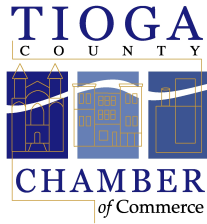
Business Address: _____ Phone Number: _____

_____ Email: _____



Building Preparation Plan

Describe how you will prepare your building or workplace for reopening here:



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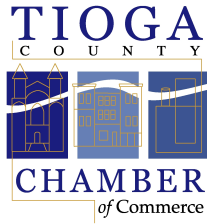
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Workforce Return to Work Plan

Describe how you will prepare your workforce for reopening your business here:



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Controlled Access Plan

Describe how you will control or limit staff and public access into your building or workplace here:



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Social Distancing Plan

Describe how you will keep staff and public in your building or workplace a safe six feet apart here:



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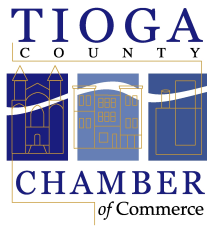
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Continuous Cleaning Protocol

Describe how you will clean and sanitize your building or workplace daily here:



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Communications Plan

Describe how you will communicate clearly and transparently to your employees regarding business operational changes due to COVID-19 here:



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COVID-19 In The Workplace

Describe how you will handle if staff shows symptoms of COVID-19 in the workplace and how to handle return of recovered COVID-19 staff here:



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Additional Information

Provide any additional information you feel is relevant to your business's re-opening plan: