



**Kodiak Area Emergency Services Organization
Reopening Business Form**



This Business has Submitted and Received Mitigation Plan Acceptance



Island Trails Network

Company Name: _____

Andy Schroeder

Authorized Representative: _____

Authorized Representative Contact: _____ andy@islandtrails.org - 907-205-5222 ext 104

Date received by EOC: _____ 5/21/20

Mitigation Receipt Number: _____ K-096

Any person with symptoms consistent with COVID-19 may not enter the premises.

Upon Review of a Mitigation Plan a Receipt Number will be issued - Place this in your store front.

