*INSERT LETTER HEAD HERE IF AVAILABLE*

Date of issuance – [27 March 2020]

To whom it may concern

**ESSENTIAL SERVICES EMPLOYEE TRAVEL AUTHORITY**

[*Employee name*] is employed by [*Employer name and business name*], which is considered an essential service and is permitted to remain operational during the New Zealand Covid-19 Alert Level 4 shutdown.

Refer: <https://covid19.govt.nz/government-actions/covid-19-alert-level/essential-businesses/>

Any entity involved in the packaging, production and processing of food and beverage products, whether for domestic consumption or export

[*Employee name*] is travelling for essential work purposes. Their usual hours of work are from [*start time*] to [*finish time*].

For any questions regarding their movements for work purposes please contact [*Employer name*] on [*Phone number*].

This arrangement has been agreed by both [Employee name] and [Employer name].

Employer signature Employee signature

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