

UNITED STATES NAVY					
SHIP SANITATION CONTROL EXEMPTION CERTIFICATE / SHIP SANITATION CONTROL CERTIFICATE					
Issued IAW Article 39 of the International Health Regulations (2005). Certificate valid for 6 months from time of issuance.					
1. SHIP NAME:		2. HULL NUMBER (Example "CV 65"):	3. SHIP HOMEPORT		4. INSPECTION DATE (DD-MMM-YYYY):
5. WEIGHT (CHECK ONE:) UNLADEN LADEN TONS OF CARGO		6. TYPE OF CERTIFICATE ISSUED: SHIP SANITATION CONTROL EXEMPTION CERTIFICATE (SSCEC) SHIP SANITATION CONTROL CERTIFICATE (SSCC)			
7. Directions For Completing Items 1 Through 25 Below: a. AREAS INSPECTED. Mark box if area inspected; leave box blank if not applicable or not inspected. For inspection findings, which indicate a ship corrective action needed, provide recommendations along with Navy reference in block 11, Results and Recommendations. b. EVIDENCE FOUND. Mark box if evidence exists of infection or contamination that may affect adversely the health of human populations, with an emphasis on those which may spread internationally or may present a serious and direct danger. Consider vectors in all stages of growth; animal reservoirs for vectors; rodents or other species that could carry human disease, microbiological, chemical, and other risks to human health; and signs of inadequate sanitary measures. Also consider any human cases that would be included in the Maritime Declaration of Health.					
Item No.	AREAS INSPECTED (Systems & Services)	EVIDENCE FOUND	DOCUMENTS REVIEWED	CONTROL MEASURES APPLIED	RE-ASSESSMENT DATE (DD-MMM-YYYY)
1	Rodent Infestation	<input type="checkbox"/>	Pest Control Log		
Vermin Infestation					
2	Cockroaches	<input type="checkbox"/>	Pest Control Log		
3	Flies	<input type="checkbox"/>			
4	Bed Bugs	<input type="checkbox"/>			
5	Other	<input type="checkbox"/>			
6	Berthing/Quarters	<input type="checkbox"/>	Habitability Inspections		
7	Sewage (CHT)	<input type="checkbox"/>			
8	Ballast Discharge Mgt (Valves closed for non-discharge zones)		(if applicable)		
Food Safety/Galley					
9	Approved Sources	<input type="checkbox"/>	NAVMED 6240/1 Training Records		
10	Ready Use Dry Storage	<input type="checkbox"/>			
11	Bulk Dry Storage	<input type="checkbox"/>			
12	Ready Use Refrigerated Storage	<input type="checkbox"/>			
13	Bulk Refrigerated Storage	<input type="checkbox"/>			
14	Food Safety Training	<input type="checkbox"/>			
15	Preparation	<input type="checkbox"/>			
16	Serving	<input type="checkbox"/>			
17	Hand Hygiene	<input type="checkbox"/>			
Drinking Water					
18	Approved Source	<input type="checkbox"/>	Drinking Water Log		
19	Medical Surveillance	<input type="checkbox"/>			
Solid Waste					
20	Handling	<input type="checkbox"/>			
21	Disposal	<input type="checkbox"/>			
Medical Waste					
22	Handling	<input type="checkbox"/>			
23	Disposal	<input type="checkbox"/>			
Medical					
24	Disease Surveillance	<input type="checkbox"/>	- Vaccination Records - Medical Readiness Inspection		
25	Facility and Public Health Areas	<input type="checkbox"/>			
<input type="checkbox"/> Public Health Risks of International Concern NOT Found				<input type="checkbox"/> Public Health Risks of International Concern Found With Control Measures Applied - Refer to Annex 2 of International Health Regulations (2005) - Notify the Navy and Marine Corps Public Health Center within 24 hours	
(Results and recommendations, if any, are provided on page 2)				8. CDC SEAL No.:	(press seal here)
9. INSPECTOR'S SIGNATURE:				10. SSCEC EXPIRES: (DD-MMM-YYYY)	

UNITED STATES NAVY

SHIP SANITATION CONTROL EXEMPTION CERTIFICATE / SHIP SANITATION CONTROL CERTIFICATE

Issued IAW Article 39 of the International Health Regulations (2005). Certificate valid for 6 months from time of issuance.

SHIP NAME:	HULL NUMBER:	SHIP HOMEPORT:	INSPECTION DATE (DD-MMM-YYYY):
------------	--------------	----------------	--------------------------------

11. RESULTS AND RECOMMENDATIONS:

- Nothing should be written in this area except documenting findings and making recommendations.
- If there are no findings or recommendations, then simply draw a diagonal line from top left to bottom right and mark with "NFE", No Further Entries.
- Ensure CDC Public Health Services (PHS) seal is visible on both pages after scanned by using a pencil to shade impression.

This SSCEC is valid for six (6) months and will expire: _____

This SSCEC may be extended up to, but not beyond, 30 days from the expiration date and requested from original inspector or an authorized CDC seal holder (NAVMED 6210/2 will be issued).

12. SHIP'S POINT OF CONTACT INFORMATION

a. NAME (LAST, FIRST, MI):	b. PHONE (DSN): (COMM):	c. EMAIL:
----------------------------	----------------------------	-----------

13. INSPECTOR CONTACT INFORMATION

a. RANK AND NAME (LAST, FIRST, MI):	b. PHONE (DSN): (COMM):	c. EMAIL:
d. COMMAND UIC:	e. COMMAND NAME:	

ORIGINAL: Provide to Ship

COPY 1: Submit Scanned Copy to: <https://esportal.med.navy.mil/sites/nmcphc/STARS/>

COPY 2: Inspector's File