

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:) <input type="checkbox"/> UNLADEN <input type="checkbox"/> LADEN <input type="checkbox"/> TONS OF CARGO		6. TYPE OF CERTIFICATE ISSUED: <input type="checkbox"/> SHIP SANITATION CONTROL EXEMPTION CERTIFICATE (SSCEC) <input type="checkbox"/> 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)		<i>(if applicable)</i>		
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
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(Results and recommendations, if any, are provided on page 2)	8. CDC SEAL No.:	(press seal here)
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9. INSPECTOR'S SIGNATURE:	10. SSCEC EXPIRES: (DD-MMM-YYYY)
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