

United States Navy

NOTIFICATION OF 30 DAY EXTENSION OF SHIP SANITATION EXEMPTION CONTROL CERTIFICATE

SHORE STATION:		DATE (DD MMM YYYY):
EXPIRATION DATE OF EXISTING CERTIFICATE (DD MMM YYYY):		
INSPECTING AUTHORITY (NEPMU/MTF) FOR LAST INSPECTION		
ORGANIZATION NAME:		
ORGANIZATION POINT OF CONTACT:	ORGANIZATION TELEPHONE NUMBER:	
SHIP INFORMATION		
SHIP NAME:		
SHIP HULL NUMBER:	SHIP POINT OF CONTACT:	

INSPECTOR'S NAME	
INSPECTOR'S SIGNATURE	DATE (DD MMM YYYY):