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):