



# CDC COVID-19 Conditional Sailing Certificate Application

Please complete this application as follows:

As a condition of applying for a COVID-19 Conditional Sailing Certificate, a cruise ship operator must meet CDC's standards for protection of crew in U.S. waters and have successfully conducted a simulated voyage or series of simulated voyages demonstrating the cruise ship operator's ability to mitigate the risks of COVID-19 onboard its cruise ship.

At least 60 calendar days prior to intending to commence restricted passenger operations, a cruise ship operator must submit this application and all supporting documentation.

CDC review of this application:

CDC will review this application for completeness after receiving all necessary documents. CDC will grant or deny this application, in whole or in part, based on its determination as to whether the cruise ship operator has met CDC's standards for mitigating the risk of COVID-19 onboard the cruise ship for which the operator intends to commence restricted passenger operations.

If CDC requires additional information to determine whether the cruise ship operator has met CDC's standards for mitigating the risk of COVID-19 on board cruise ships, or if it determines that the application is incomplete, it may suspend its review pending the submission of such additional information as required by CDC to make such a determination.

CDC may limit the terms or conditions of a cruise ship operator's COVID-19 Conditional Sailing Certificate in regard to passenger or crew capacity, itinerary, ports of call, length of voyage, onboard or shoreside activities, or in regard to any other passenger or crew operations, as needed to protect the passenger and crew health and safety or the public's health.

Applications that are denied in their entirety may be appealed administratively to the CDC Director. CDC will provide additional information regarding how to submit an appeal if it decides to deny this application in its entirety.

## CDC COVID-19 Conditional Sailing Certificate Cruise Ship Operator Requirements

### CRUISE SHIP OPERATOR AND SHIP INFORMATION

Name of Cruise Ship Operator:

# CDC COVID-19 Conditional Sailing Certificate Application

Name of Cruise Ship Parent Company:
Name of Cruise Ship:
Name and Contact Information for Third-Party Auditor (if any):
Date of Simulated Voyage 1:
Date of Simulated Voyage 2 (if applicable):
Date of Simulated Voyage 3 (if applicable):
Dates "After-Action" Reports were Submitted to CDC for Each Simulated Voyage:
Date Cruise Ship Operator Intends to Commence Passenger Operations:
Proposed carrying capacity for passengers and crew:
Proposed length of voyages:
Proposed itinerary (attach additional sheets as needed):
Proposed ports of call (attach additional sheets as needed):
Proposed onboard activities (attach additional sheets as needed):
Proposed shoreside activities (attach additional sheets as needed):

# CDC COVID-19 Conditional Sailing Certificate Application

## RESPONSIBLE OFFICIALS INFORMATION

For purposes of applying for a COVID-19 Conditional Sailing Certificate, the Cruise Ship Operator's Responsible Officials must certify compliance with the requirements contained in CDC's Framework for mitigating the risk of COVID-19 on board cruise ships, and CDC's technical instructions or orders, and agree to continue to comply with these requirements. The Chief Executive Officer (or equivalent), Chief Compliance Officer (or equivalent), and the highest-ranking Medical Officer, of the cruise ship's operating company and all parent companies must provide their contact information and signatures below.

### Operating Company

#### Chief Executive Officer (or Equivalent) of Operating Company

Last name: First name: Middle initial:

Title:

Telephone number: Email:

Address:

#### Chief Compliance Officer (or Equivalent) of Operating Company

Last name: First name: Middle initial:

Title:

Telephone number: Email:

Address:

#### Highest-Ranking Medical Officer of Operating Company

Last name: First name: Middle initial:

Title:

Telephone number: Email:

Address:

### Parent Company

#### Chief Executive Officer (or Equivalent) of Parent Company

Last name: First name: Middle initial:

Title:

# CDC COVID-19 Conditional Sailing Certificate Application

Telephone number:	Email:	
Address:		
<b>Chief Compliance Officer (or Equivalent) of Parent Company</b>		
Last name:	First name:	Middle initial:
Title:		
Telephone number:	Email:	
Address:		
<b>Highest-Ranking Medical Officer of Parent Company</b>		
Last name:	First name:	Middle initial:
Title:		
Telephone number:	Email:	
Address:		
<b>CONDITIONAL SAILING CERTIFICATE REQUIREMENTS</b>		
<p>The Cruise Ship Operator must meet the requirements in this application prior to receiving permission to commence restricted passenger operations. These requirements apply as a condition of obtaining or maintaining a COVID-19 Conditional Sailing Certificate and apply to any cruise ship operating in U.S. waters and to cruise ships operating outside of U.S. waters if the cruise ship operator intends for the ship to return to operating in U.S. waters at any time while these requirements remain in effect.</p>		
<b>1.</b>	I have submitted a complete statement of intent stating the name, carrying capacity for passengers and crew, itinerary, ports of call, length of voyages, and expected onboard or shoreside activities, for the cruise ship that I intend to have certified for restricted passenger operations.	
<b>2.</b>	I have submitted a copy of the United States Coast Guard Certificate of Inspection issued in accordance with 46 CFR § 2.01-5 that was in effect for the six months preceding this application.	
<b>3.</b>	I certify under 18 U.S.C. § 1001 that the cruise ship operator has complied and remains in compliance with CDC's crew protection requirements as contained in CDC's framework for mitigating the risk of COVID-19 on board cruise ships, and in CDC's technical instructions or orders, prior to applying for this COVID-19 Conditional Sailing Certificate.	

## CDC COVID-19 Conditional Sailing Certificate Application

<b>4.</b>	I certify under 18 U.S.C. § 1001 that the cruise ship operator has adopted health and safety protocols that meet CDC’s standards for mitigating the risk of COVID-19 among passengers and crew onboard the cruise ship named in this application, and will modify these protocols as needed to protect the public’s health as required by CDC technical instructions or orders.
<b>5.</b>	I certify under 18 U.S.C. § 1001 that the cruise ship operator has sufficient medical and point-of-care laboratory capabilities and staff on board the cruise ship to manage severe COVID-19 cases and outbreaks in exigent circumstances as required by CDC technical instructions or orders.
<b>6.</b>	I certify under 18 U.S.C. § 1001 that the cruise ship operator is in compliance with all other requirements contained in CDC’s framework for mitigating the risk of COVID-19 on board cruise ships and agree to continue to comply with these requirements.
<b>7.</b>	<p>I have documented the written approval of all U.S. port and local health authorities where the cruise ship named in this application intends to dock or make port during a restricted passenger voyage. Such written approval includes the following:</p> <ul style="list-style-type: none"> <li>(1) A medical care agreement between the cruise ship operator and health care entities, addressing evacuation to onshore hospitals for passengers and crew in need of care, in accordance with CDC technical instructions and orders.</li> <li>(2) A housing agreement between the cruise ship operator and one or more shoreside facilities for isolation and quarantine of COVID-19 cases and close contacts, respectively, identified from the day of embarkation through disembarkation for each voyage, in accordance with CDC technical instructions and orders.</li> <li>(3) A port agreement between the cruise ship operator and port authority limiting the number of cruise ships at any single port in order to not overburden the public health response resources of any single jurisdiction in the event of a COVID-19 outbreak.</li> </ul>
<b>8.</b>	I agree, upon request, to make the cruise ship operator’s properties and records available for inspection to allow CDC to ascertain compliance with its requirements. Such properties and records include but are not limited to vessels, facilities, vehicles, equipment, communications, manifests, list of passengers, and employee and passenger health records. I also agree to make any crew member or other personnel involved in the operation of a cruise ship available for interview by CDC.
<b>9.</b>	I agree, upon request, to submit proof to CDC of having been inspected by any other agency or entity with authority, jurisdiction, or oversight over any aspect of the cruise ship operator’s operations.
<b>10.</b>	The cruise ship operator has established mechanisms to ensure compliance, including reporting mechanisms to notify CDC and USCG in writing within 24 hours of the occurrence of any deviations from CDC’s requirements, whether intentional, or as a result of error or omission, and agree to take corrective steps to rectify those deviations.
<b>11.</b>	The cruise ship operator has in marketing materials, on its website, and in offerings for voyages, notified prospective passengers prior to accepting a reservation of any CDC travel health notices, warnings, or recommendations relating to cruise travel or any planned ports of

## CDC COVID-19 Conditional Sailing Certificate Application

	call. Such notifications further advise prospective passengers that, if COVID-19 has been detected in passengers or crew on board the cruise ship during a voyage, the voyage will be ended immediately and the ship returned to the U.S. port of embarkation, and their subsequent travel, including their return home, may be restricted or delayed.
12.	Prior to embarkation, the cruise ship operator will screen passengers and crew for signs and symptoms of or known exposure to COVID-19 and deny boarding to anyone who is suspected of having COVID-19 or is an identified contact of a confirmed or suspected case, in accordance with CDC technical instructions or orders.
13.	The cruise ship operator will conduct laboratory testing of all passengers and crew on the day of embarkation and again on the day of disembarkation in accordance with CDC technical instructions or orders. Laboratory test results will be available prior to passengers embarking and prior to passengers and crew departing for their final destinations after disembarking the ship.
14.	The cruise ship operator will immediately conduct laboratory testing of any passengers and crew who report illness consistent with COVID-19 during the voyage with rapid point-of-care results as required by CDC technical instructions or orders. Identified close contacts of cases must also be laboratory tested with rapid point-of-care results.
15.	The cruise ship operator will report syndromic surveillance and all laboratory test results using CDC's Enhanced Data Collection (EDC) form as required by CDC technical instructions or orders.
16.	The cruise ship operator has met CDC's standards for hand hygiene, use of face masks, and social distancing for passengers and crew, as well as ship sanitation, as required by CDC technical instructions or orders.
17.	The cruise ship operator has modified meal service and entertainment venues to facilitate social distancing.
18.	I understand and acknowledge that in light of public health considerations and based on evidence gained through review and evaluation of the cruise ship operators' practices and procedures, including through simulated voyages, CDC may also require the following: <ol style="list-style-type: none"> <li>1) A monitored observation period of passengers prior to embarking</li> <li>2) Post-disembarkation laboratory testing of passengers and crew</li> <li>3) Additional laboratory testing of passengers and crew and reporting of results during a voyage</li> </ol>
19.	I understand and acknowledge that CDC may issue additional technical instructions or orders regarding health and safety standards for restricted passenger voyages.
20.	I understand and acknowledge that CDC may require a cruise ship operator to amend or modify its COVID-19 Conditional Sailing Certificate after one has been issued based on public health considerations specific to the cruise ship, cruise ship operator, or affecting the health or safety of cruise travel as a whole.

# CDC COVID-19 Conditional Sailing Certificate Application

<b>21.</b>	<p>I understand and acknowledge that CDC may deny an application for a COVID-19 Conditional Sailing Certificate, or revoke or suspend a COVID-19 Conditional Sailing Certificate after one has been issued if:</p> <ol style="list-style-type: none"> <li>1) the cruise ship operator is not in compliance with CDC’s standards for mitigating the risk of COVID-19 on board cruise ships; or</li> <li>2) the cruise ship operator is not in compliance with the terms of its COVID-19 Conditional Sailing Certificate; or</li> <li>3) necessary to protect human health or safety based on public health considerations specific to the particular cruise ship operator, cruise ship, or affecting cruise travel as a whole.</li> </ol>
------------	--

**I understand and acknowledge that I am submitting this form as part of an application to obtain permission to commence cruise ship passenger operations in U.S. waters and that the statements contained herein are true and correct to the best of my knowledge and belief.**

**I acknowledge that any false or misleading statements or omissions may endanger health and safety, including but not limited to the loss of lives and other irreparable harm. Therefore, false or misleading statements or omissions may result in criminal and civil actions for fines, penalties, damages, and imprisonment.**

**Chief Executive Officer (or Equivalent) of Operating Company**

Last name:	First name:	Middle initial:
------------	-------------	-----------------

Signature:	Date:
------------	-------

**Chief Compliance Officer (or Equivalent) of Operating Company**

Last name:	First name:	Middle initial:
------------	-------------	-----------------

Signature:	Date:
------------	-------

**Highest-Ranking Medical Officer of Operating Company**

Last name:	First name:	Middle initial:
------------	-------------	-----------------

Signature:	Date:
------------	-------

**Chief Executive Officer (or Equivalent) of Parent Company**

Last name:	First name:	Middle initial:
------------	-------------	-----------------

Signature:	Date:
------------	-------

**Chief Compliance Officer (or Equivalent) of Parent Company**

Last name:	First name:	Middle initial:
------------	-------------	-----------------

Signature:	Date:
------------	-------

**Highest-Ranking Medical Officer of Parent Company**

# CDC COVID-19 Conditional Sailing Certificate Application

Last name:	First name:	Middle initial:
Signature:		Date:
<i>For official use only:</i>		

DRAFT