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| VESSEL SANITATIONINSPECTION REPORTCorrective ActionLog 13 | | | | |
| Date |  | **Voyage #** | **Vessel**: | **Issued by** : Name  **Safety & Quality Department** |
| **Attn:** | **Master**  Name |  | **Hotel Director**  Name | **Issued by** : Name  **Hotel Operations Department** |

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| **COMMENTS:** | ACTION |
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**NOTE: this form is for use by shore based staff**