

Form (3).

ORDER FOR SHIP TO PERFORM QUARANTINE.  
Under Section 112 of the Health Act, 1920.

Port of \_\_\_\_\_  
To \_\_\_\_\_, Master of [State class of ship and name].  
In pursuance of the power conferred on me by section 112 of the Health Act, 1920, I hereby order the [State class of ship and name] into quarantine, together with all persons and goods on board the vessel.  
Given under my hand this \_\_\_\_\_ day of \_\_\_\_\_, 192 .  
\_\_\_\_\_  
Port Health Officer.

Form (4).

ORDER FOR PERSON TO PERFORM QUARANTINE.  
Under Section 115 of the Health Act, 1920.

Port of \_\_\_\_\_  
To \_\_\_\_\_.  
In pursuance of the power conferred on me by section 115 of the Health Act, 1920, I hereby order \_\_\_\_\_ into quarantine.  
Given under my hand this \_\_\_\_\_ day of \_\_\_\_\_, 192 .  
\_\_\_\_\_  
Port Health Officer.

Form (5).

ORDER FOR GOODS TO BE SUBJECTED TO QUARANTINE.  
Under Section 119 of the Health Act, 1920.

To \_\_\_\_\_.  
In pursuance of the power conferred on me by section 119 of the Health Act, 1920, I hereby order into quarantine the following goods which are on the ship whereof you are master [or of which you are or appear to be the owner, consignee, possessor, or custodian]:  
Given under my hand this \_\_\_\_\_ day of \_\_\_\_\_, 192 .  
\_\_\_\_\_  
Port Health Officer.

Form (6).

CERTIFICATE OF RELEASE FROM QUARANTINE.  
Under Section 127 of the Health Act, 1920.

I HEREBY certify that [Here state name of ship or person] has duly performed quarantine, and being free from the infection of any infectious disease is released from quarantine.  
Given under my hand this \_\_\_\_\_ day of \_\_\_\_\_, 192 .  
\_\_\_\_\_  
Medical Officer of Health.

Form (7).

CERTIFICATE OF RELEASE FROM QUARANTINE.  
Under Section 127 of the Health Act, 1920.

I HEREBY certify that the following goods, of which you are or appear to be the owner, consignee, possessor, or custodian, have duly performed quarantine, and being free from the infection of infectious disease are released from quarantine:  
Given under my hand this \_\_\_\_\_ day of \_\_\_\_\_, 192 .  
\_\_\_\_\_  
Medical Officer of Health.

Form (8).

UNDERTAKING AS TO EXPENSES INCURRED IN REMOVAL OF PERSONS FROM SHIP TO HOSPITAL OR PLACE OF ISOLATION.  
Under Section 111 of the Health Act, 1920.

I [WE], \_\_\_\_\_, of \_\_\_\_\_, being the master [or owner, or agents] of the [Class and name of ship], at present in the Port of \_\_\_\_\_, in consideration of the persons mentioned hereunder being removed to a public hospital or place of isolation for treatment or isolation, hereby undertake to pay for all expenses incurred for all services rendered in connection with the removal, isolation, maintenance, and treatment of the said persons, of whom particulars are set out hereunder:—

Name of Person.	Reason for Removal.	Date removed from Vessel to Hospital.

(Signed).....  
Master [or Owner, or Agents] of the Ship.  
Dated \_\_\_\_\_, 192 .

Form (9).

UNDERTAKING OF MASTER OF SHIP IN RESPECT OF A PERSON DETAINED ON BOARD.  
Under Section 111 of the Health Act, 1920.

I, \_\_\_\_\_, Master of the [Class and name of ship], at present in the Port of \_\_\_\_\_, do hereby undertake to observe the instructions of the Port Health Officer, as set out hereunder, in regard to the detention on board of the persons mentioned hereunder.

Name of Person.	Reason for Detention.	Instructions.*

\* To be filled in by the Port Health Officer.  
(Signed)....., Master.

Dated \_\_\_\_\_, 192 .  
Witness \_\_\_\_\_

Form (10).

UNDERTAKING OF PERSON RELEASED UNDER MEDICAL SURVEILLANCE.

I, \_\_\_\_\_, at present on board the ship \_\_\_\_\_, and liable to quarantine, hereby undertake, if released under medical surveillance, to faithfully comply with the regulations relating to release under medical surveillance, and to report myself to the Medical Practitioner and at the times and places indicated hereunder:—

Places at which Person shall report for Medical Examination.	Medical Practitioner to whom he shall report.	Dates on which he shall report.

(To be filled in by the Medical Officer of Health.)

My address during the ensuing \_\_\_\_\_ days will be \_\_\_\_\_  
[Date.] [Signature.]

NOTE.—It will be sufficient if this undertaking be signed by the head of a family in cases where more than one member of a family desire to leave under surveillance, provided every member above twenty-one years of age must give a separate undertaking.

Form (11).

ORDER TO MASTER TO CLEANSE, FUMIGATE, OR DISINFECT THE SHIP.  
Under Section 128 of the Health Act, 1920.

To \_\_\_\_\_, Master of [Insert name and class of ship].  
In my opinion the above-mentioned ship is in an insanitary condition [in a condition favourable to the outbreak or spread of a notifiable infectious disease], and in accordance with the above section I hereby order the said vessel to be taken to [State place to which ship shall be taken] and there [State process in detail of cleansing, fumigating, or disinfection], within [State time within which work shall be done].  
Given under my hand this \_\_\_\_\_ day of \_\_\_\_\_, 192 .  
\_\_\_\_\_  
Port Health Officer.

Form (12).

OUTWARD BILL OF HEALTH.

Vessel : \_\_\_\_\_  
Nationality : \_\_\_\_\_  
Registered tonnage : \_\_\_\_\_  
\*Vessel clearing for : \_\_\_\_\_  
Surgeon : \_\_\_\_\_  
Date of arrival at this port : \_\_\_\_\_  
Date of departure : \_\_\_\_\_  
\*Number of (a) Crew \_\_\_\_\_ ; (b) Passengers—1st \_\_\_\_\_  
2nd \_\_\_\_\_, 3rd \_\_\_\_\_  
Sanitary measures taken at this port :—  
(a.) Vessel not quarantined [quarantined on account of (See Statement I on back of form)].  
(b.) Vessel not disinfected [disinfected on account of (See Statement II on back of form)].  
(c.) Rodent destruction measures carried out (See separate Fumigation Certificate).  
(d.) Number and nature of cases of infectious disease removed for isolation at this port : \_\_\_\_\_