PRE-EMBARKATION CERTIFICATE OF DISINSECTION		OMB No. 0704-0568 OMB approval expires: February 29, 2024	
The public reporting burden for this collection of information (0704-0568), is estimated to average ten minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Department of Defense, Washington Headquarters Services, at whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. Response with original signatures will accompany the aircraft to destinations requiring aircraft disinsection in accordance with the Foreign Clearance Guide. A copy of this form, will be sent to the pest			
management coordinator for the base of departure, where the disinsection was completed.			
This is to certify that the below aircraft has been disinsected on Disinsection of Military Aircraft.	(MM/DD/YYYY) in accordance with AF	PMB Technical Guide 4,	
PARTI			
1. AIRCRAFT REGISTRATION (TAIL NUMBER)			
2. PORT OF DEPARTURE	3. DATE OF DEPARTURE		
4. MISSION DESIGN SERIES			
PART II			
CABIN DISINSECTION			
5. NAME OF ACTIVE INGREDIENT OF PRODUCT APPLIED			
6. SIZE OF CANS USED (GRAMS)			
7. SERIAL NUMBERS OF CANS USED			
8. Cabin disinsection completed by:			
a. NAME (Last, First, Middle Initial)	b. JOB TITLE and GRADE/RANK		
c. ORGANIZATION	d. SIGNATURE		
PARTIII			
HOLD DISINSECTION			
9. NAME OF ACTIVE INGREDIENT OF PRODUCT APPLIED			
10. SIZE OF CANS USED (GRAMS)			
11. SERIAL NUMBERS OF CANS USED			
12. Hold disinsection completed by: Check if same as above			
a. NAME (Last, First, Middle Initial)	b. JOB TITLE and GRADE/RANK		
c. ORGANIZATION	d. SIGNATURE		

INSTRUCTIONS The prescribing document is as issued by using DoD component.		
A. PART I: The following information is provided by the insecticide applicator or aircrew prior to disinsection.	C. PART III: Hold Disinsection. The following information is provided by the insecticide applicator.	
(1) Aircraft registration (tail number). List the aircraft registration number/tail number.	(9) Name of active ingredient of product applied. Print the ACTIVE INGREDIENT name(s) shown on the label on the insecticide cans.	
(2) Port of departure. The airport/base where the aircraft left the United States. This will also be the location where the disinsection takes place.	(10) Size of cans used. List the amount and unit of measure, usually grams, of insecticide cans.	
(3) Date of departure. The date that the aircraft is scheduled to leave the port of departure.	(11) Serial numbers/lot numbers of cans used. In the provided spaces, list the serial numbers or the lot numbers of the insecticide cans sprayed in the aircraft cargo hold. If more than six cans were used, list the seventh and further numbers at the bottom of the form.(12) Hold disinsection completed by:	
(4) Mission-design series. The type and model of aircraft, i.e. C-130J, KC-135R, etc.		
B. PART II: Cabin Disinsection: The following information is provided by the insecticide applicator.	(a) Name. Legibly print the full name of the person who performed the hold disinsection.	
(5) Name of active ingredient of product applied. Print the ACTIVE INGREDIENT name(s) shown on the label on the insecticide cans.	(b) Job title and grade/rank. Write the job title and grade or rank of the person who performed the hold disinsection.	
(6) Size of cans used. List the amount and unit of measure, usually grams, of insecticide cans.	(c) Organization. The insecticide applicator's organization, government agency or commercial firm.	
 (7) Serial numbers/lot numbers of cans used. In the provided spaces, list the serial numbers or the lot numbers of the insecticide cans sprayed in the air craft cabin. If more than six cans were used, list the seventh and further numbers at the bottom of the form. (8) Cabin disinsection completed by: (a) Name. Legibly print the full name of the person who performed the cabin disinsection. (b) Job title and grade/rank. Print the job title and grade or rank of the person who performed the cabin disinsection. (c) Organization. The insecticide applicator's organization, government agency or commercial firm. (d) Signature. The insecticide applicator's signature is required. 	 (d) Signature. The insecticide applicator's signature is required. D. DISPOSITION OF FORM: TRANSMISSION: Form may be electronically transmitted, faxed, mailed or hand-carried. Form is "FOR OFFICIAL USE ONLY," and must be protected as such. FILING: Original Pre-embarkation Certificate of Disinsection (PCD), with original signatures in Parts II and III will accompany aircraft to destinations requiring aircraft disinsection in accordance with the Foreign Clearance Guide. A copy of PCD, must be maintained on file for one year in the office of the base pest management coordinator. Completion of disinsection will be recorded in IPMIS/NOPRS/DD 1532 and in the aircraft maintenance log. 	