附件4

有限空间作业专项整治情况统计表（季报）

填报单位： 填报时间：

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 序号 | 受检单位 | 检查时间 | 问题隐患（数量） | 已整改（数量） |
| 1 |  |  |   |   |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
| 6 |  |  |  |  |
| 7 |  |  |  |  |
| 8 |  |  |  |  |
| 9 |  |  |  |  |
| 10 |  |  |  |  |
| 11 |  |  |  |  |
| 12 |  |  |  |  |
| 13 |  |  |  |  |
| 14 |  |  |  |  |
| 15 |  |  |  |  |
| 16 |  |  |  |  |

填报人员： 联系电话：