附件2

易制爆危险化学品台账

院部名单： 院部安全负责人： 填表人： 日期：

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| **序号** | **校区-房间** | **责任人** | **易制爆物品名称** | **库存数量（毫升/克）** | **是否双锁** | **是否有防爆柜** | **是否使用记录台账** | **使用用途** | **备注（继续使用还是报废处置）** |
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