附件2：

建筑施工企业安全生产许可证核查表

**企业名称：　　　　　　　　　　　　　　　　　（公章）**

**企业注册地址：**

**实际办公地址：**

**企业联系人：**

**联系方式：**

**填报日期：  　   年   　  月     日**

填

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| 本人郑重声明：  本企业此次填报的《建筑施工企业安全生产许可证核查表》及附件材料的全部数据、内容是真实的，同样我在此所做的声明也是真实有效的。我知道虚假的声明与资料是严重的违法行为，此次动态核查提供的资料如有虚假，本企业愿接受天津市住房和城乡建设委员会及其他有关部门依法给予的处罚。    企业法定代表人：（签名） （公章）  年 月 日 |

**企业法定代表人声明**

**一、企业基本情况**

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| --- | --- | --- | --- | --- | --- | --- |
| 企业名称 |  | | | | | |
| 注册地址 |  | | | 邮编 |  | |
| 营业执照注册号 |  | | | | | |
| 经济类型 |  | | | 设立时间 |  | |
| 联系人 |  | 联系电话 | |  | 办公电话 |  |
| 电子邮箱 |  | | | 职工人数 |  | |
| 资质类别及等级附原件（附原件） | 类别及等级 | |  | | | |
| 资质证书编号 | |  | | | |

**二、企业主要负责人简况**

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| **法定代表人** | | | | | | | | | | |
| **姓名** |  | | | **性别** | |  | **最高学历** | | |  |
| **职务** |  | | | **职称** | |  | **专业** | | |  |
| **固定电话** | | |  | | **移动电话** | | |  | | |
| **安全生产考核发证单位** | | |  | | **发证时间** | | |  | | |
| **证书编号** | | |  | | **证书有效期** | | |  | | |
| **经理** | | | | | | | | | | |
| **姓名** |  | | | **性别** | |  | **最高学历** | | |  |
| **职务** |  | | | **职称** | |  | **专业** | | |  |
| **固定电话** | |  | | | | **移动电话** | | |  | |
| **安全生产考核发证单位** | |  | | | | **发证时间** | | |  | |
| **证书编号** | |  | | | | **证书有效期** | | |  | |
| **分管安全生产副经理** | | | | | | | | | | |
| **姓名** |  | | | **性别** | |  | **最高学历** | | |  |
| **职务** |  | | | **职称** | |  | **专业** | | |  |
| **固定电话** | |  | | | | **移动电话** | | |  | |
| **安全生产考核发证单位** | |  | | | | **发证时间** | | |  | |
| **证书编号** | |  | | | | **证书有效期** | | |  | |
| **分管生产经营的副总经理** | | | | | | | | | | |
| **姓名** |  | | | **性别** | |  | **最高学历** | | |  |
| **职务** |  | | | **职称** | |  | **专业** | | |  |
| **固定电话** | |  | | | | **移动电话** | | |  | |
| **安全生产考核发证单位** | |  | | | | **发证时间** | | |  | |
| **证书编号** | |  | | | | **证书有效期** | | |  | |
| **技术负责人** | | | | | | | | | | |
| **姓名** |  | | | **性别** | |  | **最高学历** | | |  |
| **职务** |  | | | **职称** | |  | **专业** | | |  |
| **固定电话** | |  | | | | **移动电话** | | |  | |
| **安全生产考核发证单位** | |  | | | | **发证时间** | | |  | |
| **证书编号** | |  | | | | **证书有效期** | | |  | |
| **安全总监** | | | | | | | | | | |
| **姓名** |  | | | **性别** | |  | **最高学历** | | |  |
| **职务** |  | | | **职称** | |  | **专业** | | |  |
| **固定电话** | |  | | | | **移动电话** | | |  | |
| **安全生产考核发证单位** | |  | | | | **发证时间** | | |  | |
| **证书编号** | |  | | | | **证书有效期** | | |  | |

**三、项目负责人简况**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **序号** | **姓名** | **个人资格情况** | | **专业技术职称情况** | | **安全生产考核情况** | |
| **等级** | **注册证号** | **职称** | **证书编号** | **发证时间** | **证书编号** |
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**四、专职安全生产管理人员简况**

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| **安全管理机构负责人** | | | | | | | | | | | | |
| **姓名** | | |  | | | **性别** | |  | **最高学历** | | |  |
| **职务** | | |  | | | **职称** | |  | **专业** | | |  |
| **固定电话** | | | |  | | | | **移动电话** | | |  | |
| **安全生产考核发证单位** | | | |  | | | | **发证时间** | | |  | |
| **证书编号** | | | |  | | | | **证书有效期** | | |  | |
| **专职安全生产管理人员** | | | | | | | | | | | | |
| **序号** | **姓名** | **职称** | | | **证书编号** | | **安全生产考核情况** | | | | | |
| **发证时间** | | | **证书编号** | | |
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**五、特种作业人员简况**

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| --- | --- | --- | --- | --- | --- | --- |
| **序号** | **姓名** | **工种** | **特种作业操作资格证书** | | | |
| **发证单位** | **发证时间** | **证书编号** | **证书有效期** |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |