齐鲁工业大学（山东省科学院）实验室安全隐患整改情况汇总表

单位(盖章)： 负责人签字： 填报人及电话： 时间：

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| **序号** | **实验室名称** | **地点** | **房间（号）** | **安全责任人** | **存在安全隐患** | **整改情况及建议** |
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