附件5

各街道（镇）瓶装液化气用户台账

填报单位：

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 地址 | 店名 | 负责人 | 电话 | 收到申请  并受理时间 | 备注 |
|  |  |  |  |  |  |
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