附件1

深圳市2023年度建筑废弃物综合利用产品认定项目申请书

项 目 名 称

申 请 单 位 （盖公章）

申 请 时 间

**填报说明**

1.申请项目符合《深圳市建筑废弃物综合利用产品认定办法》等有关规定。

2.申请项目名称规范完整，数据准确，文字表述清晰。

3.本项目申请书内容应按要求填写完整，不得漏填、缺项，并符合申请材料的装订要求。

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| **一、申请单位基本情况** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **（一）基本信息** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 申请单位名称 | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| 统一社会信用代码 | | | |  | | | | | | | | | | | | 消纳备案证明编号 | | | | | |  | | | | | |
| 通讯地址 | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| 生产地址 | | | |  | | | | | | | | | | | | 厂区占地面积（平方米） | | | | | |  | | | | | |
| 法定代表人 | | | |  | | | | | | | | | | | | 联系电话 | | | | | |  | | | | | |
| 经办人 | | | |  | | | | 身份证号码 | | | | | |  | | | | | | 联系电话 | | | | | | |  |
| **（二）质量管理体系** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 质量管理负责人 | | | | | |  | | | | | | | | | 联系电话 | | | | | | | | |  | | | |
| 质量管理部门 | | | | | |  | | | | | | | | | 专职从事产品质量管理人数 | | | | | | | | |  | | | |
| 质量管理体系是否建立 | | | | | | □已建立 □未建立 | | | | | | | | | | | | | | | | | | | | | |
| 质量管理体系采用标准 | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| 质量管理体系是否运行 | | | | | | □已运行 □未运行 | | | | | | | | | | | | | | | | | | | | | |
| 质量管理体系是否认证 | | | | | | □已认证 □未认证 | | | | | | | | | | | | | | | | | | | | | |
| 质量体系认证机构名称 | | | | | |  | | | | | | | | | 认证时间 | | | | | | | | |  | | | |
| 企业组织架构：  部门职责分工： | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **（三）产品检测体系** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 检测能力概述 | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| 检测人员情况 | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| 主要检测仪器设备 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 序号 | 设备名称 | | | | 型号规格 | | | | 制造商 | | | | 数量 | | | | | | 位置 | | | | | | | 检定单位 | |
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| **二、申请认定综合利用产品项目情况** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **（一）综合利用产品基本信息** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 产品名称 | | | | 规格型号 | | | | | | 适用部位 | | | | | | 产品执行标准 | | | | | | | | | | | 备注 |
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| 产品类型：□ 再生骨料板材类 □ 再生骨料砌体块材类  □ 工程渣土制品类 □ 其他类 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **（二）综合利用产品生产工艺及设备情况** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **（三）综合利用产品生产原材料配合比明细表** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 生产原材料名称 | | | | | | | 材料用量（吨） | | | | | | | | | | | | | | 材料质量占比（%） | | | | | | |
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| 注：原材料配合比数据按生产一批次综合利用产品填写（若需保密，请注明）。 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **（四）综合利用产品生产原材料采购台账** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 生产原材料 | | 采购来源 | | | | | | | | | 材料用量（吨） | | | | | | 进厂时间 | | | | | | 运输车辆号牌 | | | | |
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| 注：1.采购数据按近三个月原材料采购情况填写，后续现场复核时，需提供采购合同作为佐证材料，以备核查。2.原材料非建筑废弃物的，无需填写运输车辆号牌。 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **（五）综合利用产品销售台账** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 综合利用产品 | | | 销售去向 | | | | | | | | | 销售数量 | | | | | | 应用工程部位 | | | | | | | 出厂时间 | | |
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| 注：销售数据按近一年销售情况填写，后续现场复核时，需提供销售合同及收款发票作为佐证材料，以备核查，若无销售合同对应的收款发票需提供情况说明。 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **三、申请单位确认意见** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 我单位确认此次申请的所有材料内容及所附资料均真实、合法。如有不实之处，愿承担相应的法律责任及由此产生的一切后果。  项目申请单位（盖章）：  法定代表人或授权委托人（签章）：  年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | | |