灭 火 器 检 查 记 录

编号：\_\_企业代码\_\_-S-06

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| 检查日期 | 灭火器是否清洁 | 铅封是否  完好 | 喷嘴、喷管是否  完好畅通 | 压力表指针  是否正常 | 灭火器箱状态 | 检查人 | 监督人员签字 | 位置 | 备注 |
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| 要求： 1、检查人员必须每月对灭火器进行一次安全检查，并实事求是填写检查记录。 | | | | | | | | |  |
| 2、检查人发现灭火器有异常时需及时处理并上报，确保完整有效。 | | | | | | | | |  |