**附件2：**

**中国农药行业HSE合规企业复审申请表**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **企业名称** |  | | | | | | |
| **生产地址** |  | | | | | | |
| **联 系 人** |  | | | | **职位** |  | |
| **电话/手机** |  | | | | **传真** |  | |
| **E-mail** |  | | | | **邮编** |  | |
| **申请类型** | 复审 □ 升级□ | | | | | | |
| **HSE合规企业认证时间** | | |  | | | | |
| **HSE合规企业认证级别** | | |  | | | | |
| **预约审计日期** | | |  | | | | |
| **企业信息** | | | | | | | |
| 企业类型 | | 原药企业 □ | | 制剂企业 □ | | | 供应链企业 □ |
| 企业简介描述 | |  | | | | | |
| 产品名称与产量（吨/年） | |  | |  | | |  |
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授权人签字： 公司（盖章）：

日 期：