**附件2**

安全生产考核报名人员信息表（新取证）

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| 姓名 \* | 证件类型 \*(1:二代身份证;2:军官证 ;3:护照证号) | 证件号码 \* | 公司名称 \* | 统一社会信用代码\* | 电话\* | 人员类型\*（ABC类） |
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