様式第10号（第16条関係）

危険物製造所等災害発生届出書

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | | | | | | | | | | | 年 | | |  | | | | 月 |  | | 日 |
| 下田消防本部 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 消防長 |  | | 様 | | | | | | | | | | | | | | | | | | | | | | | |
| 届出者 | | | | | | | | 住所 | |  | | | | | | | | | | | | | | | | |
| 氏名 | |  | | | | | | | | | | | | | | | | |
| 電話 | | | | | | | | | |  | | | | | | | | | | | | | | | | |
| 設置者の住所氏名  法人にあっては  その名称及び代表者氏名 | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| 設置場所 | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| 危険物取扱者の  住所・氏名 | | 住所 | |  | | | | | | | 免　　状 | | | |  | | 種　第 | | | | |  | | | 類 | |
| 氏名 | |  | | | | | | | 第 | | | | | |  | | | | 号 | |
| 災害発生年月日・時間 | | | |  | 年 |  | 月 | |  | | | 日 |  | | | | | 時 | |  | | | 分頃 | | | |
| 災害発生場所 | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| 災害発生の原因  及びその処置等 | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| 被害の状況その他 | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| その他参考事項 | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| ※　　受　　　付 | | | | ※　　処　　　　理 | | | | | | | | | | ※　　摘　　　要 | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | |  | | | | | | | | | | | | |

備考　１　※印の欄は記入しないこと。