附件1

自建房安全隐患问题整治台账

市州：

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 序号 | 建筑基本情况 | | | | | | | 隐患清单 | | | 措施清单 | | | | 备注 |
| 建筑名称 | 建筑地址 | 所有权人 | 建筑用途 | 建成时间 | 结构类型 | 建筑层数 | 初判隐患情况 | 安全  鉴定  结论 | 排查单位 | 是否采取应急处置措施 | 采取的管控措施 | 整改措施 | 整改完成时间 |
| 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

填表人：附件2

自建房安全专项整治工作进度汇总报表

市州：（盖章） 数据截止日期：

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 内容 | 排查自建房数量（栋） | | | | | | 排查发现存在安全隐患问题的自建房数量（栋） | | | | | | | | | | | | | | | 隐患问题整改数量（栋） | | | | | | | | | | | | | | |
| 总数量 | 经营性自建房 |  | | | 其它自建房 | 经营性  自建房 | | |  | | | | | | | | | 其它自建房 | | | 经营性  自建房 | | |  | | | | | | | | | 其它自建房 | | |
| 三层以上的 | 涉及10人以上出租经营和三合一混用的 | 违规改建扩建的 | 三层以上的 | | | 涉及10人以上出租经营和“三合一”混用的 | | | 违规改建扩建的 | | | 三层以上的 | | | 涉及10人以上出租经营和“三合一”混用的 | | | 违规改建扩建的 | | |
| 初判存在隐患 | 鉴定为C级 | 鉴定为D级 | 初判存在隐患 | 鉴定为C级 | 鉴定为D级 | 初判存在隐患 | 鉴定为C级 | 鉴定为D级 | 初判存在隐患 | 鉴定为C级 | 鉴定为D级 | 初判存在隐患 | 鉴定为C级 | 鉴定为D级 | 拆除 | 加固 | 停用、撤离人员 | 拆除 | 加固 | 停用、撤离人员 | 拆除 | 加固 | 停用、撤离人员 | 拆除 | 加固 | 停用、撤离人员 | 拆除 | 加固 | 停用、撤离人员 |
| 城市 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 农村 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 合计 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

填报人： 联系电话： 填报日期：