Приложение

к Межотраслевым правилам

 (в ред. Приказа Минздравсоцразвития РФ о т 27.01.2010 N 28н) Лицевая сторона личной карточки

**ЛИЧНАЯ КАРТОЧКА N \_\_\_**

**учета выдачи СИЗ**

Фамилия \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Пол \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Имя \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Отчество \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Рост \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Табельный номер \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Размер:

Структурное подразделение \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ одежды \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Профессия (должность) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ обуви \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Дата поступления на работу \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ головного убора \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Дата изменения профессии (должности) или противогаза \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

перевода в другое структурное подразделение респиратора \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ рукавиц \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 перчаток \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Предусмотрена выдача\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 (наименование типовых (типовых отраслевых) норм)

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| Наименование СИЗ | ПунктТиповыхнорм \* | Единица измере-ния | Коли-чествона год |
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**Руководитель структурного подразделения** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (подпись) (Ф.И.О.)

 Оборотная сторона личной карточки

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| Наименование СИЗ | N сертификата или декларациисоответствия | Выдано | Возвращено |
| дата | коли- чес-тво | % из- носа | подписьполу- чившегоСИЗ | дата | коли-чест-во | % из носа | подписьсдавше-го СИЗ | подпись приняв- шего СИЗ |
| **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** |
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