**附件:**

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| **南昌市建设工程装配式项目审查合格统计表** | | | | | | | | | | | | | | | |
| **填报单位：** | | | | **填报人：** | | | | **联系方式：** | | | | **填报时间：** | | | |
| **序号** | **建设项目名称** | **工程**  **类别（公建/居住）** | **建筑面积(含地下室)（㎡）** | **装配式建筑面积（㎡）** | **是否有地下室** | **建设地点（县区）** | **建设单位名称** | **设计单位名称** | **图审机构名称** | **建设单位联系人** | **建设单位联系人电话** | **审查时间** | **图审单位**  **联系人** | **图审单位联系人电话** | **备注** |
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| 注： 本表由施工图审查机构填写，于每月15日将审查合格的项目情况报送至南昌市住建局，联系电话0791-83884160。 | | | | | | | | | | | | | | | |