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作成年月日 　　 年 月 日

作 成 者 所 属 　　　　 職 氏 名

上記のとおり相違ないことを証明する。

所 属 長

（注）災害発生現場を平面図により表示し、被災者及び現認者の位置がわかるようにして下さい。