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| 特殊建築物等に関する報告書 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| 豊橋市長　様 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 建築主　住　所 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 氏　名 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 豊橋市建築基準法施行細則第９条の規定に基づき、下記のとおり報告します。 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 記 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| ２　所有者の住所及び氏名 | | | 〒  電話　　　　（　　） | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| ３　管理者の住所及び氏名 | | | 〒  電話　　　　（　　） | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| ４  建  築  物  の  概  要 | ア　名　　　　　　称 | |  | | | | | | | | | | | | ウ | | | | | | | |  | | | | | | | |  |
| イ | |  | | | | | | | | | | | | エ　全体の棟数 | | | | | | | |  | | | | | | | |  |
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| ５　建　築　物　別　概　要 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| ア　設計者の住所及び氏名 | | 〒  電話　　　　（　　） | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| イ　施工者の住所及び氏名 | | 〒  電話　　　　（　　） | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| ウ　棟　　 　番 　　　号 | |  | | エ工事種別 | | | |  | | | | オ構　　造 | | | | | | 造 | | | | | カ　最高の高さ | | | | | | |  |  |
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| ケ  特定建  築  設  備  等及び昇降機等の  概  要 |  |  | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | |  |
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| 換　　気　　設　　備 |  | | | | 自然換気 | | | |  | | | | | | | | | | | | | | | 空気調和  設　　備 | | | | | 適用除外 |  |
| 給 気 機  排 気 機 | | | | | | 給気機  排気口 | | | 給 気 口  排 気 機 | | | | | |  |
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| 火　気　使　用　室 | | | |  | | | |  | | | | | |  | | |  | | | | | |  | | | | |  |  |
| 上　記　以　外 | | | |  | | | |  | | | | | |  | | |  | | | | | |  | | | | |  |  |
| 排　　煙　　設　　備 |  | | | |  | | | | | | | |  | | | | |  | | | | | | | |  | | | |  |
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| 廊　　　下　　　等 | | | |  | | | | |  | | | | | | |  | | | | | |  | | | | |  | |  |
| 防火設備 | 防　　 火 　　扉 | | | | 随 時 閉 鎖 式 | | | | | | | 枚 | | | | | | 常 時 閉 鎖 式 | | | | | | | | | 枚 | | |  |
| 防火シャッタ ー | | | | 枚 | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 耐火クロススクリーン | | | | 枚 | | | | | | | | | | | | | | | | | | | | | | | | |  |
| ドレンチャー ・  その他（　　　　） | | | | 台 | | | | | | | | | | | | | | | | | | | | | | | | |  |
| コ  階  別  用  途  別  床  面  積 | 階  用途 | 階 | | | 階 | | 階 | | | | | 階 | | | | | 階 | | | 階 | | | | | | 階 | | | | 合　　計 |  |
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| ※　確認済証交付年月日  　　及び確認済証番号 | | 年　　月　　日  第　　　　　号 | | | | | | | | | | ※　検査済証交付年月日  　　及び検査済証番号 | | | | | | | | | | 年　　月　　日  第　　　　　号 | | | | | | | | |  |