**安全生产大检查方案**

**单位（部门）名称: 时间：**

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| --- | --- | --- | --- | --- | --- |
| **序号** | **工作内容** | **负责人** | **时间节点** | **方式** | **备注** |
| 1 | 动员部署 |  |  |  |  |
| 2 | 自查自纠 |  |  |  |  |
| 3 | 集中检查 |  |  |  |  |
| 4 | 巩固深化 |  |  |  |  |
|  |  |  |  |  |  |

**单位（部门）负责人签字：**