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|  | | | | | | |  | 事業者名 |  |
|  | | | | | | |  | ご担当者名 |  |
| 顛　末　書 | | | | | | | | | |
|  | | | | | | | | | |
|  | このたびアマゾンフルフィルメントセンターで発生した危険物混入について、調査結果を下記の通りご報告いたします。 | | | | | | | | |
| 記 | | | | | | | | | |
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|  | 1. | 商品発送日 | | |  | | | | |
|  | 2. | 納品先FC | | |  | | | | |
|  | 3. | 混入危険物 | | |  | | | | |
| **〇下記項目は、すべて必須回答です。** | | | | | | | | | |
|  | 4. | 発生日時  (商品梱包日時) | | | |  | | | |
|  | 5. | 発生原因 | | | | 具体的な内容 | | | | | |
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| **以下、再発防止策をご記入ください。** | | | | | | | | | |
|  | 6. | 混入を防ぐ対策 | | | | 具体的な内容 | | | |
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|  |  |  | |  | | | | | |
|  | 7. | 危険物の管理体制 | | | | 具体的な内容 | | | |
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|  | 8. | 社内周知方法 | | | | 具体的な内容 | | | |
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|  |  |  | | 以上 | | | | | |