附

广东省国产牙膏简化备案主动注销申请表

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| --- | --- | --- | --- | --- |
| **序号** | **产品名称** | | **备案编号** | |
| **1** |  | |  | |
| **2** |  | |  | |
| **3** |  | |  | |
| **4** |  | |  | |
| **5** |  | |  | |
| **...** |  | |  | |
| **备案人名称** |  | **生产企业名称** | |  |
| **联系人** |  | **电话** | |  |
| **注销原因：** | | | | |
| **备案人（签章）** | | | | |
| **年 月 日** | | | | |