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| |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | 附件2  仁怀市惠民殡葬申报审批表（二） | | | | | | | | | | | | | | 死亡姓名 |  | 性别 |  | | 年龄 | | |  | | | 死亡人员  照片 | | | 户籍所在地 | 省 市（地、州） 县（市、区） 乡镇（街道） 村（居） | | | | | | | | | | | 申请人姓名 |  | 身份证号码 | | |  | | | 联系电话 | | |  | | | 家庭住址 |  | | | | | | | | | | | | | 死亡时间 |  | | | 入馆治丧天数 | |  | | | | 火化时间 | |  | | 申请减免殡葬服务项目 | 遗体接运费 元； 遗体停放费 元；  遗体火化费 元； 骨灰寄存费 元。  合计：（大写： 元） | | | | | | | | | | | | | 殡仪服务  机构意见 | 经办人： 年 月 日 | | | | | | 民政局意 见 | | 经办人： 年 月 日 | | | | | 丧主（签字）：  本表殡仪服务机构负责填写，一式二份，由殡仪服务机构和市民政局各留存一份）。 | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |