附3：

编 号：\_\_\_\_\_\_\_\_\_\_\_\_\_

申报类别：**信用中介服务机构扶持项目**

2024年度苏州市社会信用体系建设

项目申报书

 申报单位（章）：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 项目名称：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 填报日期：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

苏州市发展和改革委员会

信用中介服务机构扶持项目申报表

申报单位：（盖章）

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| 信用服务机构名称 |  |
| 统一社会信用代码 |  | 服务机构备案号 |  |
| 法定代表人 |   | 法定代表人身份证号码 |  |
| 住 所 |  | 邮政编码 |  |
| 成立时间 |  | 注册资本 | 万元 |
| 联系人 |  | 手机 |  | 传真 |  |
| E-mail |  |
| 经营范围 |  |
| 信用服务产品主要种类 |  |
| 组织结构（包括内设部门和外设分支机构及关联企业） |  |
| 人员数量及构成 |  |

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| --- |
| 服务机构主要人员情况 |
| 姓名 | 职务 | 职称 | 执业资格 | 信用服务从业经历 |
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| 基本财务状况 | 需填写的关键财务指标：总资产总负债实收资本主营业务收入营业利润净利润 |

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| 辅导完成信用修复企业数量及企业名称 |  |
| 法定代表人签字：  （公章） 年 月 日 |
| 主管部门意见 | 区信用主管部门意见：签字（盖章）日期： | 区财政部门意见：签字（盖章） 日期： |

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