附件2：《户外分段抗风平移门》征求意见表

单位（或专家）名称：

| **序号** | **章节/条文号** | **意见内容** | **修改建议** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| ... |  |  |  |
| ... |  |  |  |