**Tanggapan/Masukan terhadap**

**Rancangan Peraturan BSN tentang Pelaksanaan Pengembangan SNI**

**Nama :**

**Instansi :**

| No urut | Batang tubuh peraturan/Lampiran/Pasal/ Subpasal/Paragraf | **Tipe**tanggapan (editorial, umum, substansi teknis) | Tertulis | Tanggapan/komentar | Usulan perubahan |
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