



**DTDC Express Limited**  
 Regd. Office: No-3, Victoria Road  
 Bengaluru - 560047

ORIGIN \_\_\_\_\_ DEST. \_\_\_\_\_  
 POUCH NO. \_\_\_\_\_ DATE 1/2/24

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Non Negotiable Consignment Note / Subject to Bengaluru Jurisdiction.

The consignment note is not a tax invoice. A tax invoice will be made available by DTDC or its channel partner as the case may be, upon request.

1 Sender's (Consignor) Name: **KUNABOYINA Ph:**  
 Company Name & Address: **Anil Govt Area Hospital**  
 City: \_\_\_\_\_ State: \_\_\_\_\_ PIN Code: \_\_\_\_\_  
 Sender's GSTIN\*: \_\_\_\_\_ \*Where Applicable

2 Recipient's (Consignee) Name: **Ajit Singh Ph:**  
 Company Name & Address: **operation manager**  
 City: \_\_\_\_\_ State: **New Delhi** PIN Code: **110064**  
 Recipient's GSTIN\*: \_\_\_\_\_ \*Where Applicable

3 Nature of consignment (✓)  Dox  Non-Dox  Total Num Pcs: \_\_\_\_\_  
 DIM 1: L \_\_\_\_\_ cm X B \_\_\_\_\_ cm X H \_\_\_\_\_ cm X \_\_\_\_\_ Pcs Actual Wt.: \_\_\_\_\_ kg  
 DIM 2: L \_\_\_\_\_ cm X B \_\_\_\_\_ cm X H \_\_\_\_\_ cm X \_\_\_\_\_ Pcs Volumetric Wt.: \_\_\_\_\_ kg  
 DIM 3: L \_\_\_\_\_ cm X B \_\_\_\_\_ cm X H \_\_\_\_\_ cm X \_\_\_\_\_ Pcs Chargeable Wt.: \_\_\_\_\_ kg

4 Description of Content \_\_\_\_\_ Total Value of consignment for carriage / E-Way bill: **₹ 150**

Paper Work Enclosures \_\_\_\_\_

6 Type of consignment (✓)  Commercial  Non Commercial  7 Value Added Services  Net Available  CN Expiry Date \_\_\_\_\_

I/We declare that this consignment does not contain personal mail, cash, jewellery, contraband, illegal drugs, any prohibited items and commodities which can cause safety hazards while transporting

9 Charges Amount(₹) 8 Mode (✓)  Surface  Air Cargo  Express   
 a) Tariff (incl. Of FSC + Taxes) \_\_\_\_\_  
 b) Risk Surcharge \_\_\_\_\_  
 c) Total amount (a+b) \_\_\_\_\_  
 Above charges are inclusive of GST & other applicable taxes.  
 Mode of Payment: Cash  Card  Wallet   
 Consignment Number: **H45854278**  
 Contact: **9440730401, 9246862421**

Sender's Signature & Seal \_\_\_\_\_

11 Booking Branch / Franchisee Code \_\_\_\_\_ 12 Risk Surcharge \_\_\_\_\_  
 Courier Signature \_\_\_\_\_ Owner \_\_\_\_\_  
 Carrier \_\_\_\_\_

Time: \_\_\_\_\_ AM/PM  
 read and understood terms & conditions printed overleaf of consignment note and I agree to the same.

ACCOUNTS COPY \_\_\_\_\_ March 2023

<http://www.dtdc.in> || [customersupport@dtdc.com](mailto:customersupport@dtdc.com) || +91-7305770577