

SG BAJRANG LOGISTICS PVT LTD

Created Date: 18/04/24
Pickup Date: 19/04/24

Drop-Off

260337817



260337817

Self Collect

1. FROM: **Shipper's Name: SGBAJRANG B2BC**

Shipper's Phone Number:

Street Name: Curesta Global Hospital IRBA Dialysis unit.....835219

City: Ormanjhi State: Jharkhand Postal Code: 835219

GST NO.:

2. SHIPMENT INFORMATION

SHIPPER'S REFERENCE NO. (25 characters): 46905

INVOICE NO.: 123 EWBN: Master Id: 24144310586423

TOTAL INVOICE VALUE: 45000.0

BOXES X DIMENSION (LxWxH) COMMODITY DESCRIPTION TOTAL WEIGHT *

1: 30 x 30 x 30 GOODS 20.0 kgs

**As declared by the client, billed weight may vary.*

BOX COUNT: 1

DOCUMENT RECEIVED: INVOICE () TAX FORMS () OTHERS ()

3. REQUIRED SIGNATURE - ORIGIN:

DELIVERY EMP ID: SHIPPER'S SIGN:

DELIVERY LIMITED

REGISTERED OFFICE: N24-N34, S24-S34, Air Cargo Logistics Centre-II, Opposite Gate 6 Cargo Terminal, IGI Airport, New Delhi, India (110037)

TRANSPORTER ID: 06AAPCS9575E1ZR

CIN No: U63090DL2011PTC221234

PAN: AAPCS9575E

SPOTON LOGISTICS PVT LTD (Formerly Startrek Logistics Pvt Ltd)

REGISTERED OFFICE: Thanavan, 23/24, Infantry Road, Bengaluru, India (560001)

TRANSPORTER ID: 29AAQCS5815Q1Z1

CIN No: U63090GJ2011PTC108834

PAN: AAQCS58450

Street Name: Vy hospital Raipur.....492001,,,,,8305940350

City: Raipur State: Chhattisgarh Postal Code: 492015

GST NO.:

4. TO: Recipient's Name: Chetna Sahu, Chetna Sahu

Recipient's Phone Number:

Street Name: Vy hospital Raipur.....492001,,,,,8305940350

City: Raipur State: Chhattisgarh Postal Code: 492015

GST NO.:

Client/Store/Address Code:

5. MOT: AIR GROUND

6. SPECIAL HANDLING: FRAGILE HEAVY (>30 KG) DG. VAL CARGO.

POD on Invoice

7. INSURANCE: FOV. MARINE. VALUE:

8. PAYMENT: TRANSPORT: SHIPPER RECIPIENT DUTIES & TAXES: SHIPPER RECIPIENT CASH ON DELIVERY COD AMOUNT: ₹0

CHEQUE ON DELIVERY: CHEQUE BENEFICIARY'S NAME:

9. REQUIRED SIGNATURE - DESTINATION: RECIPIENT'S SIGNATURE AND STAMP:

DATE: TIME:

*1 Box Received
24/04/24*

*2000 ₹ Courier Charges
Towards postpaid Charges
IMPOD
Fey Di'alyis Reck'ive
Qualified by Bajrang
Sia.*

Printed on 24-Apr-2024 1:00 PM

This Shipment is shipped via Delhivery and to know more about the terms and conditions visit www.delhivery.com/terms

DECLARATION FORM

Document No: 18905

Document Date: 18/04/2024

CONSIGNOR ADDRESS		CONSIGNEE ADDRESS	
Name	Pavindra Kumar	Name	Chandra Sekh
Address With Pincode	Ludhiana Golebar	Address With Pincode	VY Hospital Raipur
City Name	Hospital 1800	City Name	
State Name	Dialysis unit	State Name	
PINCODE	835219	PINCODE	492001
Phone No.	727144610	Phone No.	8305940350
GSTN	URP	GSTN	URP

S.No.	Product Name	Description of goods	Quantity (No. of Piece)	Value
1	Goods Not For Sale	Rejected	1	45,000/-
2		Goods		
3				
4				
Total Value of goods				45,000/-

Total No. of Boxes

Declaration :- I hereby declare that the goods handedover by me to the transporter are my personal goods. Further these used/old House Hold goods bear no commercial value and are not for sale.

Note :- 1. Photo Address Proof is attached here with

Photo Address Proof Type	1. Driving License		Photo Address Proof No.	799932670540
	2. Adhar Card			
	3. Voter Card			
	4. Passport			
	5. Others (Specify)			

Name of the person

Signature

