



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

**ORIGIN** \_\_\_\_\_ **DEST.** Delhi  
**POUCH NO.** \_\_\_\_\_ **DATE** 21/7/23

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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: Rajendra Ph: \_\_\_\_\_  
 Company Name & Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: Andhra PIN Code: \_\_\_\_\_  
 Sender's GSTIN\*: \_\_\_\_\_ \*Where Applicable

**2** Recipient's (Consignee) Name: Home Ph: \_\_\_\_\_  
 Company Name & Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ PIN Code: \_\_\_\_\_  
 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: medical equipment Total Value of consignment for carriage / E-Way bill: ₹ 5000

**5** Paper Work Enclosures \_\_\_\_\_

**6** Type of consignment  Commercial  Non Commercial **7** Value Added Services:  SECURE PACK **7.1** CN Expiry Date \_\_\_\_\_

**10** 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 (₹)
a)	Tariff (incl. of FSC+GST)	
b)	Value Added Service Charges	
c)	Risk Surcharge	
d)	Total amount (a+b+c)	

**8** Mode  Surface  Air Cargo  Express

Sender's Signature & Seal  
 Date: \_\_\_\_\_ Time: \_\_\_\_\_ AM/PM

Above charges are inclusive of GST & other taxes if applicable  
 Mode of Payment:  Cash  Card  Wallet

Consignment Number:   
**D38607650**

I have read and understood terms & conditions printed overleaf of this consignment note and I agree to the same.

**11** Booking Branch / Franchisee Code \_\_\_\_\_ **12** Courier Signature \_\_\_\_\_

**12** Risk Surcharge

**13** Receiver's Name: \_\_\_\_\_  
 Relationship: \_\_\_\_\_  
 Company Stamp & Signature: \_\_\_\_\_  
 Ph No.: \_\_\_\_\_ Date: / / Time: \_\_\_\_\_ AM/PM

Owner   
 Carrier



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Vendor Code: 107445

Item: Non Dox 'D' Series Note sheet with - 8.5 x 6 x 3