



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

ORIGIN BEL **DEST.** New Delhi
POUCH NO. **DATE** 11/7/2024

Non Negotiable Consignment Note / Subject to Bengaluru Jurisdiction.

1 Sender's (Consignor) Name: Ph:
2 Recipient's (Consignee) Name: Ph:
 Company Name & Address: DTDC - Health
 Company Name & Address: DTDC - Health
 City: State: PIN Code:
 City: State: PIN Code:
 Sender's GSTIN*: *Where Applicable
 Recipient's GSTIN*: *Where Applicable

3 Nature of consignment (✓)		Box <input type="checkbox"/>	Non-Box <input type="checkbox"/>	Total Num Pcs:
DIM 1	L cm X B cm X H cm X	<input type="checkbox"/>	<input type="checkbox"/>	Pcs Actual Wt.: kg
DIM 2	L cm X B cm X H cm X	<input type="checkbox"/>	<input type="checkbox"/>	Pcs Volumetric Wt.: kg
DIM 3	L cm X B cm X H cm X	<input type="checkbox"/>	<input type="checkbox"/>	Pcs Chargeable Wt.: kg

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

5 Paper Work Enclosures

6 Type of consignment (✓) Commercial Non Commercial **7** Value Added Services Not Available **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. OFSC + Taxes)	<u> </u>
b)	Risk Surcharge	<u>3000</u>
c)	Total amount (a+b)	<u> </u>

Above charges are inclusive of GST & other taxes if applicable

8 Mode (✓) **Surface** **Air Cargo** **Express**

Sender's Signature & Seal
 Date: Time: AM/PM
 I have read and understood terms & conditions printed overleaf of this consignment note and I agree to the same

Mode of Payment: Cash Card Wallet
11 Booking Branch / Franchisee Code
 Sender Signature

Consignment Number:

H46749673
12 Risk Surcharge: Owner Carrier

