

Vendor Code: 1071445



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

ORIGIN HALITPUR **DEST.** 14-10-20
POUCH NO. **DATE** BANGALORE



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:** DIALYSIS UNIT **Ph:** _____
Company Name & Address: HALITPUR
City: _____ **State:** _____ **PIN Code:** _____
Sender's GSTIN*: _____ *Where Applicable

2 **Recipient's (Consignee) Name:** UBAI @ **Ph:** _____
Company Name & Address: PATEL GUNDAPPA BLOK
10 MAIN ROAD MUMBAI
City: BANGALORE **State:** K.T. **PIN Code:** 560006
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** _____
₹ _____

5 **Paper Work Enclosures** _____
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 + Taxes)	
b)	Risk Surcharge	
c)	Total amount (a+b)	<u>200</u>

6 **Type of consignment (✓)** **Commercial** **Non Commercial** **7** **Value Added Services** **Not Available** **CN Expiry Date** _____
8 **Mode (✓)** **Surface** **Air Cargo** **Express**

Consignment Number: **U26145174**

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.

11 **Booking Branch / Franchisee Code** _____
Mode of Payment: Cash Card Wallet
Courier Signature _____

Risk Surcharge _____ **Owner** _____
Carrier _____

