



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

Non Negotiable Consignment Note / Subject to Bengaluru Jurisdiction.

ORIGIN	DEST
POUCH NO.	DATE
	16.04.23

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:** Kiransh P. Bannod
Company Name & Address: _____
City: _____ **State:** _____ **Pin Code:** _____

2 **Recipient's (Consignee) Name:** Mr. Vishnu The Executive
Company Name & Address: _____
City: _____ **State:** _____ **Pin Code:** _____

3 **Nature of consignment** **Dox** **Non-Dox**
Sender's GSTIN*: Kelshes
Actual Wt.: _____ **Actual Num Pcs:** _____
Where Applicable

4 **Recipient's GSTIN*:** _____
Description of Content: Books
Total Value of consignment for carriage / E-Way bill: ₹ 4110/-
Where Applicable

DIM 1: L cm X B cm X H cm X Pcs
DIM 2: L cm X B cm X H cm X Pcs
DIM 3: L cm X B cm X H cm X Pcs

5 **Paper Work Enclosures**
Actual Wt.: _____ **Volumetric Wt.:** _____ **Chargeable Wt.:** AN kg

6 **Type of consignment** **Commercial** **Non Commercial**
Value Added Services: **Secure Pack** **Passport** **COD** **Sunday Plus** **Office College**

7 **Mode** **Surface** **Air cargo** **Express**
Consignment Number: _____
CN Expiry Date: _____

9 **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**

10 Charges	Amount (₹)
a) Tariff (incl. of FSC+GST)	
b) Value Added Service Charges	
c) Risk Surcharge	<u>800</u>
d) Total amount (a+b+c)	

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

12 **Risk Surcharge**
Owner _____
Carrier _____

Relationship: _____
Company Stamp & Signature: _____
Ph No.: _____
Date: DD / MM / YY **Time** _____ **AM/PM**

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