



SSPL Calibration Centre

Structural Solutions Private Limited
 3-6-271, 2nd Floor. Sudheer Tapani Towers
 Himayath Nagar, Hyderabad - 500 029
 Email: sales@stsols.com, URL : www.stsols.com

Case No.:

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(1) Name of the organization/firm with full address: _____

City: _____ Pin code: _____ Contact Person: _____ Mob: _____

Phone No: _____ Fax No: _____ Email: _____

(2) Name and address of the firm/ organization in favor of which the report is to be issued: _____

City: _____ Pin code: _____ Contact Person: _____ Mob: _____

Phone No: _____ Fax No.: _____ Email: _____

(3) Address on which Report to be sent:- At Address 1: or At Address 2: Please tick any one.

(4) Customer reference number(if Known): _____ (5) SSPL Quotation No. _____ Date: _____

(6) Letter reference number (if any): _____ Date: _____

(7) Instruments / Reference Material:

Item No.	Instrument Name	Make	Model/Specifications	Sr. No.	Characteristics/Remark

(8) Calibration to be done under: Normal service: / Express service:

(9) Detail about Demand Draft/ Name of the bank: _____

(i) Draft Number: _____ Date: _____ Amount Rs.: _____

(ii) Amount transferred to / carry forwarded from Case No.: _____

(10) Time slot if allotted: _____ to _____

(11) Mode of collection of certificate/report: By hand: / By courier or speed post:

(12) Name: _____ Signature of the Customer: _____ Date: _____

For office use only

Lab's Capacity to meet the requirement: _____

Suitable calibration method to meet the requirement: _____

Work for subcontract: Yes: No:

Any deviation from contract: _____ Customers acceptance for deviation: _____

Did contract amended: Yes No

Reasons for Amendment: _____ Review Process for amendment: _____

Did Lab incharge communicated the amendment: _____

Case No.: _____	Customer ID No. _____	Signature: Name: Date:
Instruments actually accepted _____	Reason for not accepting: _____	
Calibration Test Charge: Rs. _____	Site Charges: Rs. _____ Service Tax. _____ Others _____	
Total Rs. _____	Balance Surplus if any: _____ Expired Date of completion _____	