

Received for Calibration

Due Date of delivery

R	ev.: 03;	20-01-21
WO No.:		

Officer in charge / CSC

## **Work Order for Calibration**

Name & Address of the Organisation Contact Person:								
M/s			Mr./Mrs	Mr./Mrs.				
			Designa	tion:				
		Tel. No.:	Tel. No.:					
GSTIN :			email:					
Details of the Instrument(s)		Calibration	Calibration Requirement Lob					
Name/Description	Make/Model	Sl. No.	Parameter(s)	Range(s)	Any other info.	Job No.		
Do you like to indicate the annual calibration due date in the calibration certificates & labels?								
<ul> <li>All possible care will be taken in handling the equipment, but the risk of damage in transit or in calibration must be assumed by the customer.</li> <li>An equipment accepted for calibration may be returned uncalibrated, under circumstances beyond the control of STIC.</li> <li>Instruments, which are in good working condition only, will be calibrated.</li> </ul>								
I/We agree to the above terms an	d conditions.							
Signature :	Name :		Designation :		Date :			
Please bring this form for delivery of instruments/certificates								