

A V PROCESSORS PVT LTD., AMBARNATH
DETAILS OF CONSIGNMENT WITH SPECIAL STORAGE/TEMPERATURE REQUIREMENT
TO BE FILLED BY CLIENT (Please attach additional pages if required)
(All fields are mandatory, please mark NIL or N.A. as applicable)

Client Name: _____

Product Name and Description: _____

Batch No/s: _____ Quantity: _____

No. of Boxes (AVPPL Size/ or any other size, please specify): _____

Labeling of box: _____

Any extra precaution to be taken for storage / processing: _____

Dose required: _____ in kGy (kilo Gray)

Purpose: Routine / Validation / Dose Audit (Tick whichever is applicable)

If product requires special storage/ controlled temperature before and/or after processing: yes / no

Remarks: _____

Name of Person: _____

Sign: _____

TO BE FILLED BY AVPPL

Any discrepancy noted: _____

AVPPL's Order Registration No. & Date: _____

Material storage location before processing: _____

If repacking required: Yes/ No (If yes, please specify : _____).

Receipt Date and Time	In Process Date and Time	Out Date and Time	Delivery Date & Time

Delivery Given By (AVPPL) : _____ Delivery Challan No. _____

Any discrepancy observed after process: _____

Material storage location after processing: Control Room / Laboratory

Remarks if any: _____

Signature of QAO: _____