

# N.P TRANSPORT

Post Navlakh Umbre, Tal-Maval, Dist-Pune 410 507

Email:-nptrans1981@gmail.com  
mobile no.09673731162, 7020882360

PAN NO:-AVVPP2200K  
GST NO:-27AVVPP2200K1Z9

BRANCH  
Talegaon  
SERIAL NO.  
NP 2023-24 0628

CONSIGNEE  
COPY

## NOTICE

Assignment covered by this set of  
Lorry receipt from shall be stored at the  
destination under the control of the transport  
operator & shall be delivered to the  
order of the consignee bank whose name is  
mentioned in the lorry receipt. It will under no  
circumstances be delivered to any one without  
the written authority from the consignee bank  
or its order endorsed on the consignee copy.

## AT OWNER'S RISK

### INSURANCE

The customer has started that  
• He has not insured the consignment  
• He has insured the consignment

Company

Policy

Amount

Date

Risk

Vehicle No.

Consignment Note

## CAUTION

This consignment will not be  
detained diverted, Re-routed or  
re-booked without consignee  
bank's written permission

Address of Delivery office

CONSIGNOR'S  
INVOICE NO.

WAY BILL NO.

FROM

CONSIGNOR'S  
C.S.T.No.TIN

CONSIGNOR'S NAME & ADDRESS

Benicef India Pvt  
Talegaon mde pune

CONSIGNEE'S NAME & ADDRESS

India Oil Lubricant's  
Talegaon Silvassa 396230

Benicef TO  
Silvassa

CONSIGNEE  
C.S.T.No.TIN

No. of  
Packages

Description (Said to contain)

WEIGHT

Rate

Freight To pay

Ps.

Rs.

Freight To Billed

Ps.

Plastic closer

198 Boxes

## ENDORSEMENT

It is intended to use the CONSIGNEE COPY of this set  
for the purpose of borrowing from the consignee bank

M/s. COFOTI  
S.No. 27/1/2, Silvassa-396230

Silvassa-396230

Value of Consignment Rs. 707,220

TERMS & CONDITION OVERLEAF

For N.P TRANSPORT

SERVICE TAX PAID BY:

CONSIGNOR

CONSIGNEE

TRANSPORTER

PARTY PHONE No.

HDFC BANK A/C :- 50200020570783  
IFSC : HDFC0001797  
BRANCH : TALEGAON



REPORTING  
SECRETARY  
M/s. Gulf Oil Lubricants India Ltd.  
Reporting Time:- 6:10  
Date:- 26/11/2017  
S/C Sign: [Signature]

Lot No

27AABCB

Code : MH(27)

Supplementor

Original Invoice Number

Original Invoice Date:

Name & Address (Bill)

AMERICAN