

Developed By: Catalyst Soft Tech Phone: 858888154



## Metropolis Logistics Pvt Ltd

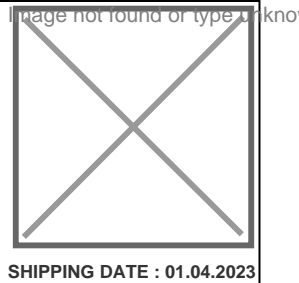
K2-832,KHASRA NO.834, MATA CHOWK MAHIPALPUR NEW  
DELHI-110037 Email:  
GSTIN No.: 07AAHCM7482L1ZU

Payment  
Mode

CREDIT

Transport  
Mode

COURIER



SHIPPING DATE : 01.04.2023

ORIGIN

BILASPUR HARYANA

DESTINATION

AHMEDABAD

**BILL TO: EXPEDITORS INTERNATIONAL INDIA  
(C01869)**

BLOCK A & D 5TH FLOOR 61 CHIMES BUILDING, PLOT NO 59 TO  
62 SEC-44 GURGAON-122003 HR  
GURUGRAM-122003

**SENDER: EXPEDITORS INTERNATIONAL  
INDIA**

BSP  
BILASPUR HARYANA-122413  
STATE NAME: HARYANA CODE: 06

**SHIP TO: SELF**

AMD  
AHMEDABAD-382415  
STATE NAME: GUJARAT CODE: 24  
GSTIN No.:

METHOD OF PACKING

DESCRIPTION (SAID TO CONTAIN)

VOLUME (CMS \ Inches)

NO. OF PIECES

CHARGES

FREIGHT

BOX

ELECTRICS ITEMS

3

ACTUAL WEIGHT

INVOICE NO. & DATE

E-WAYBILL NO

AT OWNER'S RISK / CARRIER'S RISK  
If insured, Details of Insurance Policy

EI62135305

01/04/2023

POLICY NO DATE  
INSURANCE COMPANY  
INSURED VALUE

25.000

CHARGED WEIGHT

25.000

VALUE DECLARED (Rs.)

ADD. SERVICES

GSTIN to be paid by



Consignor



Consignee



Transporter

5,054.00

Expected Delivery  
Date  
04/04/2023

DACC ?  
COD ?  
DOD ?

TOPAY AMOUNT  
MR NO.  
DATE

I/we hereby to the terms and condition setout on the reverse of this Consignor's  
copy and declare that contents of this way bill are true and correct. the to-pay  
Freight has my / our consent and will be paid by the consignee along with  
service charge as applicable at the time of delivery.

RECEIVED ABOVE SHIPMENT IN ORDER AND IN GOOD CONDITIONS

SPECIAL INSTRUCTIONS

SIGN.

STAMP

NAME

PHONE

☐ LIMITED TO RS 1000/-ONLY

☐ WE CARRY UNDER CARRIER'S ACT

NAME

CONSIGNOR'S SIGN

NAME

RECEIVED BY METROPOLIS LOGISTICS PVT LTD

DATE & TIME

BOOKING INCHARGE

CONSIGNOR COPY



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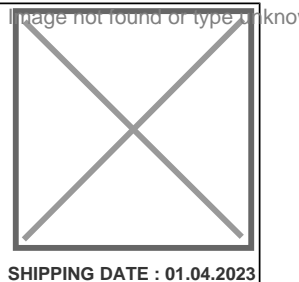
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METHOD OF PACKING	DESCRIPTION (SAID TO CONTAIN)	VOLUME (CMS \ Inches)	NO. OF PIECES	CHARGES	FREIGHT
BOX	ELECTRICS ITEMS		3	FREIGHT	
			ACTUAL WEIGHT	TO PAY CHARGES	
INVOICE NO. & DATE	E-WAYBILL NO	AT OWNER'S RISK / CARRIER'S RISK If insured, Details of Insurance Policy		RISK CHARGE	
			D/C		
EI62135305		POLICY NO    DATE INSURANCE COMPANY INSURED VALUE	25.000	DOD/COD CHARGES	
01/04/2023			CHARGED WEIGHT	HANDLING CHARGES	
VALUE DECLARED (Rs.)		ADD. SERVICES	25.000	OSC	
				FUEL SURCHARGE	
				FUEL TOTAL	
5,054.00	Expected Delivery Date 04/04/2023	DACC ? COD ? DOD ?	TOPAY AMOUNT MR NO. DATE	GRAND TOTAL	
				GSTIN to be paid by	
				<input type="checkbox"/> Consignor <input type="checkbox"/> Consignee <input type="checkbox"/> Transporter	
RECEIVED ABOVE SHIPMENT IN ORDER AND IN GOOD CONDITIONS		SPECIAL INSTRUCTIONS		I/we hereby to the terms and condition setout on the reverse of this Consignor's copy and declare that contents of this way bill are true and correct. the to-pay Freight has my / our consent and will be paid by the consignee along with service charge as applicable at the time of delivery.	
SIGN.	STAMP			NAME	
NAME		<input type="checkbox"/> LIMITED TO RS 1000/-ONLY		CONSIGNOR'S SIGN	
PHONE		<input type="checkbox"/> WE CARRY UNDER CARRIER'S ACT		RECEIVED BY METROPOLIS LOGISTICS PVT LTD	
				DATE & TIME	BOOKING INCHARGE

<div><div><div>Metropolis Logistics</div><div>On Time - Everytime</div></div><div><div>Metropolis Logistics Pvt Ltd</div><div>K2-832,KHASRA NO.834, MATA CHOWK MAHIPALPUR NEW DELHI-110037 Email: GSTIN No.: 07AAHCM7482L1ZU</div></div></div>	Payment Mode	Transport Mode	<div><div>Image not found or type is</div><div></div><div>SHIPPING DATE : 01.04.2023</div></div>
	CREDIT	COURIER	

ORIGIN		BILASPUR HARYANA		DESTINATION		AHMEDABAD					
BILL TO: EXPEDITORS INTERNATIONAL INDIA (C01869) BLOCK A & D 5TH FLOOR 61 CHIMES BUILDING, PLOT NO 59 TO 62 SEC-44 GURGAON-122003 HR GURUGRAM-122003			SENDER: EXPEDITORS INTERNATIONAL INDIA BSP BILASPUR HARYANA-122413 STATE NAME: HARYANA CODE: 06		SHIP TO: SELF AMD AHMEDABAD-382415 STATE NAME: GUJARAT CODE: 24 GSTIN No.:						
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BOX		ELECTRICS ITEMS				3		FREIGHT			
						ACTUAL WEIGHT		TO PAY CHARGES			
INVOICE NO. & DATE		E-WAYBILL NO		AT OWNER'S RISK / CARRIER'S RISK If insured, Details of Insurance Policy		25.000		RISK CHARGE			
								D/C			
EI62135305				POLICY NO    DATE INSURANCE COMPANY INSURED VALUE		25.000		DOD/COD CHARGES			
01/04/2023								CHARGED WEIGHT		HANDLING CHARGES	
VALUE DECLARED (Rs.)				ADD. SERVICES		25.000		OSC			
								FUEL SURCHARGE			
5,054.00		Expected Delivery Date 04/04/2023		DACC ? COD ? DOD ?		TOPAY AMOUNT MR NO. DATE		FUEL TOTAL			
								GRAND TOTAL			
								GSTIN to be paid by			
								<input type="checkbox"/> Consignor <input type="checkbox"/> Consignee <input type="checkbox"/> Transporter			
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RECEIVED ABOVE SHIPMENT IN ORDER AND IN GOOD CONDITIONS				SPECIAL INSTRUCTIONS				NAME  RECEIVED BY METROPOLIS LOGISTICS PVT LTD  DATE & TIME  CONSIGNOR'S SIGN  BOOKING INCHARGE			
SIGN.		STAMP									
NAME				<input type="checkbox"/> LIMITED TO RS 1000/-ONLY							
PHONE				<input type="checkbox"/> WE CARRY UNDER CARRIER'S ACT							