

LANDMARK MATERIAL TESTING AND RESEARCH LABORATORY

PT DIVISION

CONSENT TO PARTICIPATE IN PT SCHEME

---Fill the details as per following (Handwritten or typed)---

Submission of scanned image of this form through Email is acceptable.

S N	PT ROUND ID (such as LRL/PT/SOIL/A01/21)										Parameters(in which you want to participate)		
1	L	R	L	P	T								
2	L	R	L	P	T								
3	L	R	L	P	T								
4	L	R	L	P	T								
5	L	R	L	P	T								

Name of the Laboratory

.....

Name of the contact person (Mr./Mrs./Ms.).....

Designation.....

Address

.....

District.....State.....PIN.....

Google Location code of address

Telephone.....Mobile

(Please mention the numbers of the persons who will directly be involved in PT activities)

E-mail.....

(In Block Letters only eg. EXAMPLE@XYZMAIL.COM, Please mention the ID which is regularly checked by some responsible person)

Preferred Courier Agency

(Please mention the names of more than one courier agencies those have good service network at your door step)

Please tick the following check boxes in acceptance of the statement written ahead:

- We express our consent to participate in the PT round, ID & parameters of which are mentioned above.
- We have read and understood the protocol and convinced with the test parameters and respective test methods.

- All essential apparatus, chemicals, equipment and other requirements as specified in the test method shall be made available during the test.
- We understand that our participation may be revoked on non compliance with test method and/or time schedule as instructed by PTP.
- We express our consent to forward our z-score to NABL by PTP as & when required without informing us.
- We undertake to remain truthful and not to involve in any collusion or falsification for knowing the results through unfair means.
- Our Laboratory is accredited as per ISO:17025 in above all / some test parameters and our registration number is..... which is valid upto
- Our Laboratory is not accredited as per ISO:17025 in all / some test parameters, whereas only calibrated equipments will be used and calibration status will be submitted along with PT results for non accredited parameters.

Your GST

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 No.

Name & Signature

Stamp of Lab

.....
(Authorized Signatory)

Participation fee detail: (Please deposit the fees for running PT rounds or ask for Performa Invoice)

Fees*	Discount	Net Amount	GST @18%	Total Amount
.				

Avail any one discount from Following:

1. Avail opportunity discount @ 5% if applying first time for LRLPT.

OR

2. To avail privilege discount @10%, please mention any previous PT round ID in which you have participated

OR

3. To avail group discount @15%, please participate in minimum three or more PT rounds of this PT calendar. (For Bulk discount contact undersigned)

Payment Detail:Cheque**/NEFT UTR No:..... Dated.....

Drawee bank.....

Bank Account Details for payment:

Account Name: **Landmark Material Testing And Research Laboratory Pvt.Ltd.**

Bank: **HDFC BANK Ltd.,**

Bank Address: **ICG Campus, Gurukul Marg, SFS, Mansarovar, Jaipur- 302020,**

Account No. **50200027909480**, IFSC: **HDFC0000987**, Swift code : **HDFCINBBXXX**
PAN : **AABCL9797K**, GSTIN - **08AABCL9797K1ZN**, SAC-**998349**

*Cheques/DD shall be drawn in favour of "Landmark Material Testing And Research Laboratory Pvt. Ltd." payable at Jaipur.

For any enquiry please call +91-9829056760 or write to LRLPTJPR@gmail.com
EMAIL SCANNED IMAGE OF DULY FILLED COPY OF THIS FORM TO: LRLPTJPR@gmail.com

-2-