

CONTRACT REVIEW FORM

Client	Satyaki Technologies LLP		
Address	Ground Floor, Building No. M-5, new MHADA Co-Operative Housing Society, Near Alphonso School, Bajaj Nagar, Aurangabad - 431136		
Certificate on the name of	Satyaki Technologies LLP		
Certificate on the name of address	Ground Floor, Building No. M-5, new MHADA Co-Operative Housing Society, Near Alphonso School, Bajaj Nagar, Aurangabad - 431136		
GST No	27AFEF0145K1ZX	Customer Name	Mr. Amol Patil
Email	amolpatil111213@gmail.com	Phone Number	9960492376

SRF Number	CRF/2024/136	Date of Receipt	03-10-2024
DC Number	STL/DC/0901	DC Date	29-09-2024
Entry Date	03-10-2024	Calibration to be Completed on	08-10-2024

INSTRUMENT DETAILS

Sl.No	Description of the Equipment	Make	Model	Serial Number	Identification Number	Range	Calibration Points if any	Declared Accuracy / Acceptance Criteria	Cal. Frequency (Agreed with customer)	Condition of UUC / Remarks
1	Digital Multimeter	Rishabh	Rishmulti 18S	2103182522	NIA/DMM/01	As per Manual	As per observation	± Not Specified	12 Months	Ok
2	Digital Thermo Hygrometer	HTC	103-CTH	-----	NIA/THY/003	-50 °C to 70 °C, 10 %RH to 99 %RH	15,30,45°C, 25,50,90%RH	± 1 °C, ±5 %RH	12 Months	Ok

Customers Requirement	Discussion with Client:- These instruments are given for calibration purpose
Services to be rendered at	<input checked="" type="checkbox"/> Lab <input type="checkbox"/> On-Site
Method / Scope Identified	<input type="checkbox"/> Electro-Technical <input type="checkbox"/> Mechanical <input checked="" type="checkbox"/> Thermal
Method	<input checked="" type="checkbox"/> Comparison <input type="checkbox"/> Direct Source/Measurement <input type="checkbox"/> Simulation
Does the Method selected is capable of meeting Client's Requirements?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Capability of Lab?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Availability of Resources?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Is any need of External Provider for performing Calibration Activities?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Next Due date to be mentioned	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Availability of Environmental Conditions as per requirements (in case of Site Calibrations only)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Means of Communication	Via-Mail
Statement of Conformity is required?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Decision Rule Employed?	<input type="checkbox"/> Simple Acceptance Decision Rule (Reported Error must be within Acceptance Limit). <input type="checkbox"/> Reported Error + Expanded Uncertainty must be within Acceptance Limit <input checked="" type="checkbox"/> Not Applicable.
Any Deviation / Exclusion from Calibration Method?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Approximate Job duration	08-10-2024

Declaration by Laboratory: - Laboratory Activities falling under Accredited Scope in no way imply that the instrument/s calibrated is/are approved by NABL.

I/we declare that the information furnished above is correct to the best of my/our knowledge. I/we undertake to inform you at the earliest if any change in the details mentioned above.

We will entertain any special requirement other than this contract requested by you with calibration consignments given in written only

Sign (For Client)

Sign (For Chavanke Engineering Pvt. Ltd.)

Date of Actual Work Completion (for Site Calibration) / Date of Dispatch of Calibration item (for In-House Calibration):-

Sign (For Client)

Sign (For Chavanke Engineering Pvt. Ltd.)

This SRF is electronically signed and does not required physical signature