

| NIB Office use only | | |
|---------------------|--|--|
| Date received: | | |
| Order No.: | | |
| Processed by: | | |
| | | |
| | | |

ORDER FORM: REFERENCE STANDARD- Biotech Product

(To be filled by Customer)

| Contact Person: | Purchase Order No.: |
|-----------------------------------|-----------------------------|
| Organization/ Institute: | TIN No.: |
| Correspondence Address: | Delivery Address: |
| e- mail: | Customer Code: |
| Telephone: (with STD/ISD code) | Fax: (with STD/ISD code) |

| Product Name | Catalogue No. | No. of vials required |
|--------------|---------------|-----------------------|
| | | |
| | | |
| | | |

I confirm that the material may be legally sent/ imported without delay in its delivery.

Date: _____ Authorized Signatory: _____

Note:

- 1. Only written communication in English OR Hindi will be considered for accepting the order.
- 2. We regret that order is not accepted over the telephone.

| Send your order via: | | | | |
|----------------------|--------------------------------|--|--|--|
| E- Mail: | Fax : 0091-120-2403014, | Mail: National Institute of Biologicals, | | |
| info@nib.gov.in | 2400074 | Ministry of Health & Family Welfare | | |
| srrd@nib.gov.in | | (Govt. of India) | | |
| | | A-32, Sector 62, NOIDA, (UP) – 201307, INDIA | | |