This document must be completed with CAPITAL readable letters by filling in all fields of the document. The batch is unique for the combination metal, fineness and kind. To ensure the best service to the customer, incomplete or incorrectly filled Delivery Notes will not be accepted (considering that they increase the delay in the work reception and in additions to the contract).

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| **Customer Identification** |

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | | |
| Activity Code |  | | |
| NIF (taxpayer No.) |  | Phone number |  |

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| **Transportation Services** |

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| Responsible for Delivery/Reception |  | Email |  |
| Delivery Address |  | | |
| Postal Code |  | Town/City |  |
| Modalities for Secure Transportation Service of the Work | 🞎 Group 8 – Sending and Collecting the Work (Please request service at: contrasteseguro@incm.pt) | | |
| 🞎 Postal Service CTT – Shipment of the Work with declared value of:\_\_\_\_\_\_\_\_\_\_\_\_\_ € | | |

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| **Date \_\_\_ / \_\_\_ / \_\_\_\_\_\_** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Legal Representative** |
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| **Intended Service**  Single option | | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Assaying and Marking | Assaying parts and/or components | Assaying and Marking of Used Items | Assaying and Marking  AP | Batch analysis | Punch Manufacturing  /Reformation | Marking Information and Identification | VMC | Inspection at 100% | Change of Fineness Warranty Marks | Assaying and Marking under the Convention |
| 🞎 | 🞎 | 🞎 | 🞎 | 🞎 | 🞎 | 🞎 | 🞎 | 🞎 | 🞎 | 🞎 |

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| **Country of Origin**  Single option |

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| **Portugal** | 🞎 |  |

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| **European Economic Area** | 🞎 | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Country of Origin | **Invoice data** | |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  NIF (Taxpayer #) Seller | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Invoice No. |

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| **Import**  Outside the European Economic Area | 🞎 | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Country of Origin | **SAD data** | |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  SAD # | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Customs |

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| **Laboratorial Procedure Communication** |

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| If it is necessary to carry out a chemical test, do you allow the assay to be continued without prior contact?  Single option | |
| Yes | No  (I wish to be contacted beforehand) |
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| **Establishment of batch(es)** |

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| Batch No. | Kind | No. of Parts | No. of Articles | Priority  \* | Met/  fineness  1 | Weight (g)  1 | Met/  fineness  2 | Weight (g)  2 | Met/  fineness  3 | | Weight (g)  3 | Common Metal | Weight  Common Metal  (g) | Weight Others (g) | Sample Weight (g) | Mark of Responsibility | Laser | | Logo |
| Full | Lines |
| 1 |  |  |  |  |  |  |  |  |  | |  |  |  |  |  | 🞎 | 🞎 | 🞎 | 🞎 |
| Restrictions Scraping X-ray Test\*\*:🞎 | | | | | Restrictions Chemical Test\*\*:🞎 | | | | | \*\*If there are restrictions on scraping and/or chemical testing, the part should be differentiated | | | | | | | | | |
| Comments: | | | | | | | | | | | | | | | | | | | |
| 2 |  |  |  |  |  |  |  |  |  | |  |  |  |  |  | 🞎 | 🞎 | 🞎 | 🞎 |
| Restrictions Scraping X-ray Test \*\*:🞎 | | | | | Restrictions Chemical Test\*\*:🞎 | | | | | \*\*If there are restrictions on scraping and/or chemical testing, the part should be differentiated | | | | | | | | | |
| Comments: | | | | | | | | | | | | | | | | | | | |
| 3 |  |  |  |  |  |  |  |  |  | |  |  |  |  |  | 🞎 | 🞎 | 🞎 | 🞎 |
| Restrictions Scraping X-ray Test \*\*:🞎 | | | | | Restrictions Chemical Test\*\*:🞎 | | | | | \*\*If there are restrictions on scraping and/or chemical testing, the part should be differentiated | | | | | | | | | |
| Comments: | | | | | | | | | | | | | | | | | | | |
| 4 |  |  |  |  |  |  |  |  |  | |  |  |  |  |  | 🞎 | 🞎 | 🞎 | 🞎 |
| Restrictions Scraping X-ray Test \*\*:🞎 | | | | | Restrictions Chemical Test\*\*:🞎 | | | | | \*\*If there are restrictions on scraping and/or chemical testing, the part should be differentiated | | | | | | | | | |
| Comments: | | | | | | | | | | | | | | | | | | | |
| 5 |  |  |  |  |  |  |  |  |  | |  |  |  |  |  | 🞎 | 🞎 | 🞎 | 🞎 |
| Restrictions Scraping X-ray Test\*\*:🞎 | | | | | Restrictions Chemical Test\*\*:🞎 | | | | | \*\*If there are restrictions on scraping and/or chemical testing, the part should be differentiated | | | | | | | | | |
| Comments: | | | | | | | | | | | | | | | | | | | |
| 6 |  |  |  |  |  |  |  |  |  | |  |  |  |  |  | 🞎 | 🞎 | 🞎 | 🞎 |
| Restrictions Scraping X-ray Test\*\*:🞎 | | | | | Restrictions Chemical Test\*\*:🞎 | | | | | \*\*If there are restrictions on scraping and/or chemical testing, the part should be differentiated | | | | | | | | | |
| Comments: | | | | | | | | | | | | | | | | | | | |
| 7 |  |  |  |  |  |  |  |  |  | |  |  |  |  |  | 🞎 | 🞎 | 🞎 | 🞎 |
| Restrictions Scraping X-ray Test\*\*:🞎 | | | | | Restrictions Chemical Test\*\*:🞎 | | | | | \*\*If there are restrictions on scraping and/or chemical testing, the part should be differentiated | | | | | | | | | |
| Comments: | | | | | | | | | | | | | | | | | | | |

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| **Location of the logo and/or location of out-of-standard markings** |

If a mark is requested at an off-standard location, it must be accompanied by a scheme showing the desired location in the table below and physically marked on the piece with a marker

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| --- | --- | --- |
| **Insert a sketch of the piece with the desired location and orientation**  Where applicable | | |
| Batch No: |  |  |
| Logo | 🞎 |  |
| Marking out of Standard | 🞎 |  |
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| **Insert a sketch of the piece with the desired location and orientation**  Where applicable | | |
| Batch No: |  |  |
| Logo | 🞎 |  |
| Marking out of Standard | 🞎 |  |
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