

Book at 12:00 the day before, at the latest

Order and collection at:

Email: Logistik@dot.se

Delivery note



Thure Carlsson väg 5, 294 21 Sölvesborg
Fräsargatan 5, 632 29 Eskilstuna

Date: _____

Coll. address: _____

Cust. No.: _____

Delivery address

Customer: _____

Name: _____

Address: _____

Address: _____

Zip code/town: _____

Zip code/town: _____

Email: _____

Contact: _____

Tel./Contact: _____

Tel. no.: _____

Your order no. (stated on the invoice)		Your req. no. (stated on the invoice)		Desired delivery date	
DOT no. (offer/order)	No.			Pretreatment: (X) <input type="checkbox"/> Sandblasting <input type="checkbox"/> Burning of zinc <input type="checkbox"/> Protection of thread <input type="checkbox"/> Drill/cut required holes	Posttreatment: (X) <input type="checkbox"/> Thread cleaning <input type="checkbox"/> Assembly <input type="checkbox"/> Packaging <input type="checkbox"/> Finishing as required
DOT special instruction	No.				
Traceability acc. to SS/EN 1090-2. Debit acc. to. price list (tick)		Partly	Full		
Is measuring protocol after hot-dip galvanizing wanted acc. to SS/EN ISO 1461		(tick)		Surface treatment: (X) <input type="checkbox"/> Hot-dip galvanizing <input type="checkbox"/> Hot-dip galvanizing centrifuge <input type="checkbox"/> Hot-dip galvanizing high temp <input type="checkbox"/> Metallization <input type="checkbox"/> Wet coating acc. to SS/EN ISO 12944 <input type="checkbox"/> Aqua Coating <input type="checkbox"/> Powder coating	Paint requirements: (X) Corrosion category: _____ Service life: Low <input type="checkbox"/> Mid. <input type="checkbox"/> High <input type="checkbox"/> RAL: _____ Gloss: _____
Is measuring protocol after painting wanted		(tick)			
Requirement for film repair in addition to the standard requirement of 100 µm		µm			
Specify if special requirement acc. to SS/EN 1461, appendix NA: Fe/Zn					
Additional services will be debited acc. to current price list					
<input type="checkbox"/> Collected by tour lorry		<input type="checkbox"/> Delivered by tour lorry		<input type="checkbox"/> We deliver the goods ourselves	<input type="checkbox"/> We collect the goods ourselves
<input type="checkbox"/> Return using our courier. Cust. no. from our courier: _____					

Important information for correct registration of workpiece by DOT

Qty:	Designation:	Sketch:	Weight:
	Position no.:		
Height:	Width:	Length:	Packaging:

Qty:	Designation:	Sketch:	Weight:
	Position no.:		
Height:	Width:	Length:	Packaging:

Qty:	Designation:	Sketch:	Weight:
	Position no.:		
Height:	Width:	Length:	Packaging:

Qty:	Designation:	Sketch:	Weight:
	Position no.:		
Height:	Width:	Length:	Packaging:

This order is executed acc. to NGAL 11 or the latest version. All material will be loaded and unloaded by you.