



**CONFIDENTIAL LAB REPORT** Undertaking Letter

To 22/09/2022

NABL MELT Assessment Team

Dear Sir

I, Shini Sreenivas, in my capacity as sole proprietor of Hi-Tech Laboratory, do hereby solemnly affirm and state that we have planned for the calibration of our minor equipment like thermometer, microscope, centrifuge, incubator, refrigerator and pipettes within 30 days from the date of this undertaking.

We would like to state that our EQAS reports for the months of August and September 2022 have been satisfactory for all parameters

Hence, we would like to request your good selves to kindly grant us the NABL MELT accreditation.

Best Regards

Shini Sreenivas

Hi-Tech Laboratory

**HI-TECH**

# CYRIX

HEALTH CARE PVT LTD

*Genius in Healthcare, within your reach!*

30/641 B Pettah Junction Poonithura Kochi-

682038 Tel.: 9744555622

Website: [www.cyrixhealthcare.com](http://www.cyrixhealthcare.com)

Email: [sales.kl@cyrix.in](mailto:sales.kl@cyrix.in)

[Service.kl@cyrix.in](mailto:Service.kl@cyrix.in)

Location: Kerala-TamilNadu-Karntaka-  
Maharashtra-Uttar Pradesh-West Bengal



NABL ACCREDITED

**ISO 17025:2017 CC:2992**

## **CALIBRATION PROPOSAL**

Submitted by Cyrix Healthcare Pvt. Ltd.

To,

**HI TECH LAB**

**KUMILY**

# CYRIX

HEALTH CARE PVT LTD

**Cyrix Imaging Technologies | Cyrix QA | Cyrix Biomedical Testing & Calibration | Cyrix Integrated Biomedical Service | Cyrix Surgical | Cyrix Point of Care | Cyrix Mom & Baby Primary Care | Cyrix MOGS|Cyrix Medical Consumables**

Prepared By

SARATH KUMAR T S

CALIBRATION SALES AND SERVICE ENGINEER

QUOTATION NO: CHPL/TC/KL/109/2022-23

DATE: 24-08-2022

## PROJECT COSTING

SL NO	EQUIPMENT NAME	QUANTITY	PARAMETER	UNIT RATE	RATE
1	MICROSCOPE	1	ELECTRICAL SAFETY	600	600
2	CENTRIFUGE	1	RPM,ELECTRICAL SAFETY	700	700
3	INCUBATOR	1	TEMPERATURE,ELECTRICAL SAFETY	700	700
4	REFRIGERATOR	1	TEMPERATURE,ELECTRICAL SAFETY	600	600
5	PIPPETES	4	VOLUME	900	3600
6	THERMOMETER	2	TEMPERATURE	600	1200
				<b>TOTAL</b>	<b>7400</b>
				<b>GST @ 18%</b>	<b>1332</b>
				<b>GRAND TOTAL</b>	<b>8732</b>

### Payment Schedule:

Percentage	Description	Payment Due Date
50%	As Advance Along with the Purchase Order/Work Confirmation	Immediate
50%	On Final Completion of work. Delivery of Calibration Reports will be against 100% payment Only	Immediate

## TERMS AND CONDITIONS

- **Work will be started on Receipt of Formal Purchase Order along with 50% advance Payment.**
- Calibration will be performed as per NABH/NABL Guidelines
- Equipment should be in working condition and must be provided for Calibration test.
- Device under Testing with all accessories should be provided by customer in working Condition.
- Calibration failure due to Equipment functional problems or any reason beyond our control will not be held as reason for non-completion of tests /reports submission.
- We are not responsible if any Calibration fails due to machine Complaint. In such Case Calibration report will delivered only after Complaint rectification. **Second Visit of Calibration will be chargeable Extra.**
- **Minimum 80 Medical Equipment need to be given in a single day for Calibration.**
- This proposal is valid for 30 days.
- Validity of Calibration is as per NABL/NABH Guidelines
- Cyrix GSTIN NO: **32AAFCC2499H2ZM**
- **DD/Cheque should be in favour of 'Cyrix Healthcare Privet. Ltd ' OR by NEFT, Bank Details: HDFC Bank Ltd. A/C No: 50200037687840 IFSC Code: HDFC0002835**

**We hope the above will be in line with your requirement and we look forward to receiving your valued order.**

**Thanking you and assuring the best of our services at all times.**

**For Cyrix Healthcare Pvt. Ltd.**



Authorised Signatory  
SARATH KUMAR T.S  
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