

**Proficiency Testing Provider**  
**(Non -Destructive Testing & Mechanical - Building Material)**

**ANNUAL PROFICIENCY TESTING SCHEDULE – 2023**

S. No.	PT Parameter	PT Round Number	PT Schedule	Last date for registration	Participation Fee (Rs.)
1.	1. Ultrasonic PulseVelocity Test 2. Rebound Hammer Test 3. Depth of cover concrete 4. Half- Cell Potential	<b>NDT PT-17</b>	Jan 2023	13 <sup>th</sup> Jan 2023	<b>11,800/-</b> (Including GST @18%)
2.	Concrete Cube Compressive Strength	<b>PTM-06</b>	Feb 2023	31 <sup>st</sup> Jan 2023	<b>11,800/-</b> (Including GST @18%)
3.	1. Ultrasonic PulseVelocity Test 2. Rebound Hammer Test 3. Depth of cover concrete 4. Half- Cell Potential	<b>NDT PT-18</b>	May 2023	5 <sup>th</sup> may 2023	<b>11,800/-</b> (Including GST @18%)
4.	Concrete Cube Compressive Strength	<b>PTM-07</b>	June 2023	2 <sup>nd</sup> June 2023	<b>11,800/-</b> (Including GST @18%)
5.	1. Ultrasonic PulseVelocity Test 2. Rebound Hammer Test 3. Depth of cover concrete 4. Half- Cell Potential	<b>NDT PT-19</b>	Sept 2023	8 <sup>th</sup> Sept 2023	<b>11,800/-</b> (Including GST @18%)
6.	Concrete Cube Compressive Strength	<b>PTM-08</b>	Nov 2023	3 <sup>rd</sup> Nov 2023	<b>11,800/-</b> (Including GST @18%)
7.	1. Ultrasonic PulseVelocity Test 2. Rebound Hammer Test 3. Depth of cover concrete 4. Half- Cell Potential	<b>NDT PT-20</b>	Dec 2023	8 <sup>h</sup> Dec 2023	<b>11,800/-</b> (Including GST @18%)

**Remarks**

1. Payment shall be made by Online transfer only. Details of bank account is given in the end.
2. While making online payment, PT round number may be fed as “**Purpose of payment**” column.
3. PTP may cancel/reschedule any announced programme based on low turnout of participants or.
4. PT Parameters may be excluded in case of participants option

**▶ REGISTRATION FORM**

**NABL Accredited Proficiency (PT) Programme**

**Building Materials: NDT (Reinforcement Concrete)**

**PT Round Number: NDT PT-**

**Date of PT Scheduled: To be filled by PTP**

**Name of Organization:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Billing Address** (Write "Same as above" if the same): \_\_\_\_\_

**GST No.:** \_\_\_\_\_

**Is your Lab NABL Accredited?: Yes/No Certificate No. (If Yes):** \_\_\_\_\_

**Name of Contact Person:** \_\_\_\_\_

**Email ID:** \_\_\_\_\_

**Contact No.:** \_\_\_\_\_

**PT Parameter (s) to be Performed [Please tick on suitable option (s)]:**

UPV Test  Rebound Hammer Test  Depth of Cover Concrete Test

Half-cell Potential Test

**Detail of Participant(s) to be participated on the day of PT**

<b>Participant-1</b>	<b>Participant-2</b>
<b>Name</b> :	<b>Name</b> :
<b>Contact No.</b> :	<b>Contact No.</b> :
<b>Email ID</b> :	<b>Email ID</b> :

**Payment Details**

Online Transfer/NEFT/RTGS No.: \_\_\_\_\_ Amount Paid (Rs.): \_\_\_\_\_

Date: \_\_\_\_\_ Name of Bank: \_\_\_\_\_ Branch: \_\_\_\_\_

\_\_\_\_\_  
Sign of Management /Head of Organization

\_\_\_\_\_  
Date

**▶ REGISTRATION FORM**

**NABL Accredited Proficiency (PT) Programme**

**Building Materials: Mechanical (Compressive Strength of Concrete)**

**PT Round Number: PTM-**

**Date of PT Scheduled:** To be filled by PTP

**Name of Organization:** \_\_\_\_\_

**Name of Organization:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Billing Address** (Write "Same as above" if the same): \_\_\_\_\_

\_\_\_\_\_

**GST No.:** \_\_\_\_\_

**Is your Lab NABL Accredited?: Yes/No Certificate No. (If Yes):** \_\_\_\_\_

**Website:** \_\_\_\_\_

**Email ID:** \_\_\_\_\_

**Contact No.:** \_\_\_\_\_

**Payment Details**

**Online Transfer/NEFT/RTGS No.:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Name of Bank:** \_\_\_\_\_ **Branch:** \_\_\_\_\_

\_\_\_\_\_  
Sign of Management /Head of Organization

\_\_\_\_\_  
Date

## **TERMS & CONDITIONS**

### **Policy**

PT provider shall be conducting PT programme as per Policy for Participation in Proficiency Testing Activities stipulated in NABL -163 document and meet the requirements of ISO/IEC 17043:2010

### **General**

This terms and condition is applicable for participant laboratories, we have provided the following information,

- a) PT Schedule for the Year 2023
- b) Registration forms (NDT and Mechanical Schemes)

Required details for PT parameters, Participation fee and schedule with last date for registration are provided in PT Schedule.

Participants are required to make online payment with providing the detail of PT round number required to be mentioned as "Purpose of payment" column.

Registration form to be filled and scanned copy to be to send to PT Provider before last date for registration

### **Payment**

Payment shall be made only by Online transfer. Details of bank account is given in the end.

Refund is not applicable after getting confirmed registration, it cannot transfer or shift to next schedule.

### **Schedule**

PT Provider may cancel or reschedule of any announced programme based on low turnout of participants; PT provider will take decision on this matter.

### **PT Results**

PT Results shall be shared with NABL as per the requirements including details of participants and their PT results.

### **Legal**

All disputes are subject to original jurisdiction of Courts in District Mumbai (Maharashtra) India.

## Contact

Participant may contact for any clarification to below mentioned address;

Mr. E. Gopalkrishnan, PT-Coordinator,  
Dr.Fixit Institute of Structural Protection & Rehabilitation,  
C/o Pidilite Industries Limited,  
Ramkrishna Mandir Road,  
Andheri(E), P O Box 17411, Mumbai – 400 059  
Mobile – 9769222667  
E mail: e.gopalkrishnan@pidilite.com

## Online payment details as follows;

Name of Beneficiary:	Dr. Fixit Institute of Structural Protection & Rehabilitation
Account Number:	00010310002754
Name and address of Bank:	HDFC Bank Ltd., 01-104 Tulsiani Chambers, Free press Journal Marg, Nariman Point,Mumbai- 400021, Maharashtra
Branch Code:	HDFC-0000001
MICR Code of the Branch:	400240003
IFSC Code of the Branch:	HDFC0000001

Scan QR to pay

**DR FIXIT  
INSTITUTE OF  
STRUCTURAL  
PROTECT**

MUMBAI | TID:  
62495672



Scan the QR with any  
BharatQR / UPI enabled  
app

Collect payments from any of  
these app



- End of Page -

**Address:** C/o Pidilite Industries Limited, Ramkrishna Mandir Road, Andheri (E), P O Box 17411, Mumbai- 400059  
**Tel:** 022-2835 7822 **Mob:** 9769222667 **Email:** e.gopalkrishnan@pidilite.com **CIN:** L24100MH1969PLC014336