



Km. 7, McArthur Hi-way, Bangkal, Davao City

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## DCWD CALIBRATION LABORATORY JOB ORDER REQUEST FORM

*To be filled out by the Customer*

<b>JORF NO.:</b>	<b>Date Submitted:</b>	
<b>Customer name :</b>	<b>Company name:</b>	
<b>Address:</b>	<b>Type of Job:</b> <input type="checkbox"/> Normal	<b>Tel. /Cel. no.:</b>
	<input type="checkbox"/> Rush	<b>Fax no:</b>

*To be filled out by the Customer*

*To be filled out by the Laboratory Staff*

ITEM NO.	WATER METER DESCRIPTION			PHYSICAL CONDITION OF METER outON ACCEPTANCE	TAGGING NO.	CAL. FEE
	Brand	Size	Serial No.			
1				[ ] Good		
2				[ ] Good		
3				[ ] Good		
4				[ ] Good		
5				[ ] Good		
6				[ ] Good		
7				[ ] Good		
8				[ ] Good		
9				[ ] Good		
10				[ ] Good		
11				[ ] Good		
12				[ ] Good		
13				[ ] Good		
14				[ ] Good		
15				[ ] Good		
16				[ ] Good		
17				[ ] Good		
18				[ ] Good		
19				[ ] Good		
20				[ ] Good		

<b>PAYMENT DETAILS</b>	<b>Reference Bill No. :</b>		<b>TOTAL AMOUNT</b>
	<b>O.R No.:</b>	<b>Date :</b>	

*(To be filled out by the Technical Laboratory Staff)*

CALIBRATION REQUIREMENTS	AS STATED AND/OR TEST FLOWRATE/S
Estimated completion date	
Based on sample meter standard	
Partial calibration due to calibration limitations	
Partial calibration as per customer's request	
For evaluation	
Others	

<b>Remarks/Initial Findings</b>	
<b>Conforme:</b>	
<i>Print Name &amp; Signature</i>	<i>Print Name &amp; Signature</i>
Customer / Authorized Representative	Technical Laboratory Staff

*To be filled out by the Laboratory Supervisor/Technical Manager/Quality Manager*

<b>Tasked assigned to:</b> <i>(printed name)</i>	<b>Date Assigned:</b>	<b>Tasked assigned by:</b> <i>(signature over printed name)</i>
<b>Date Calibrated:</b>	<b>Date Reported:</b>	<b>Approved by:</b>

## TERMS AND CONDITIONS

1. If the instrument has no available serial number, it shall be provided by  Customer  DCWD
2. If the instrument is found to be defective/stuck customer has discretion to proceed with the calibration.
3. Before the laboratory starts the calibration process, customer or his duly authorized representative shall pay the corresponding amount stated in this Job Request Form at any DCWD cashier as follows:

### **Bajada Office**

Km. 5 J.P Laurel Avenue, Bajada, Davao City besides Robinsons Cybergate Complex  
Monday to Friday – 7:30 AM to 5:00 PM

### **Matina Office (Temporary Office)**

Mc Arthur Hi-way, Matina, Davao City fronting Department of Budget Management Office  
Monday to Friday – 7:30 AM to 5:00 PM

### **Toril Collection Office**

Toril Poblacion, Davao City inside the compound of Toril District Hall  
Monday to Friday – 8:00 AM to 5:00 PM

### **Victoria Plaza Collection Center**

JP Laurel Avenue, Bajada, Davao City  
Monday to Sunday – 10:00 AM to 7:00 PM

### **Felcris Centrale Collection Center**

Quimpo Boulevard, Davao City  
Monday to Sunday – 10:00 AM to 7:00 PM

4. DCWD agrees to provide calibration service in accordance with job request stated therein, unless otherwise specifically stipulated and agreed upon in writing by the parties.
  - a. the customer's specific instruction only, or of any other party authorized by the customer;
  - b. calibration methods and procedures considered by DCWD to be appropriate based on technical, operational and/or financial grounds.
5. Adjustments are made for "Out of Tolerance" conditions, only if requested by the customer. There are times when adjustments are not possible due to the nature of the unit. Additional charge shall be applied for adjustment services equivalent to the amount of calibration fee of the meter.
6. DCWD Calibrations does not guarantee turnaround time. However DCWD calibration considers turn around to be an important service metric. Our target is 3 - 5 working days after payment of calibration fee. Reasons for calibration delays may include;
  - a. lack of personnel (sickness, holidays, vacations, on-sites),
  - b. lack of equipment (out for calibration, down for repair, scheduled at an on-site), waiting on technical literature either from the customer or manufacturer, any other extenuating circumstances.
  - c. calibration may also be delayed due to the calibration level selected by the customer.
  - d. late submission of official receipt or proof of payment.
7. DCWD agrees to exercise reasonable diligence in performing calibration or adjustment services. However, no warranty, either express or implied is herein stipulated relative to DCWD adjustment and calibration results & facilities. In no event DCWD be liable for collateral, special or consequential damage, any error or judgement, fault or negligence of its officers or employees.
8. RUSH service is available up to a maximum of 20 units only. This service requires a calibration fee increase of twenty percent (20%) over the standard price and places the specific product requested into a "next on bench" status, which means the next available technician will work on that unit, unless pre-empted by other "RUSH" units ahead of it.
9. Laboratory assumes full responsibility for the care and protection of our customers' equipment while in our possession.  
HOWEVER, DCWD LABORATORY IS NOT RESPONSIBLE FOR:
  - a. meter submitted for calibration without a protective case, cover, or enclosure.
  - b. damages due to defects in the tool or instrument.
  - c. damage occurring during shipments to and from DCWD.
10. All calibrated water meter not claimed after 30 days shall be recalibrated, customer shall pay recalibration fee before releasing.
11. DCWD agrees to keep calibration results confidential. We will release result to parties other than the customer upon authorization by the latter, or if required by law.
12. The customer hereby authorizes DCWD to dispose in any manner it deems fit all unclaimed calibrated meters after (90) days from the date of submission of the instrument.
- 13 This contract covers only the items submitted & work specified therein, any other addition and or amendments after acceptance will be separately charge.

---nothing follows---

I have read, understood and conform to above cited terms and conditions,

\_\_\_\_\_  
Customer's Print Name and Signature

\_\_\_\_\_  
Date