

CONTRACT FOR CARRIAGE / DISPATCH NOTE



UTI South Africa (Pty) Ltd
t/a UTI Distribution
PO Box 63, The Roads 3061
Tel (012) 673-2000
Reg. No. 2004/015747/17
VAT Reg. No. 4280213873



SUBBD23614880

Sender's Details		Consignee's Details. Full Street Address Please		Mark Service Required	
Company Name	Greenstone Hill Office Park	Company Name	Le Ciel West	<input type="checkbox"/> Same Day	
Street Address	Greenstone Hill Office Park	Street Address	Unit 5 Heron Park	<input type="checkbox"/> Express	
Suburb	Edenburg	Suburb	Somerset West	<input type="checkbox"/> With Sunrise Option	
City/Town	Johannesburg	City/Town	Cape Town	<input type="checkbox"/> With Saturday Service	
Contact	Lupia	Contact	MARK	<input type="checkbox"/> Public Holiday Service	
Phone	0795117808	Phone	021 851 7178	<input type="checkbox"/> Economy	
Destination Country	South Africa	Postal Code	7130	<input type="checkbox"/> After Hours	
Sender's Reference		Analysis Code		<input type="checkbox"/> BLNS Customs Tariff	
SPECIAL INSTRUCTIONS Bill Charges To Account No. 02778777 Bill To <input type="checkbox"/> Sender <input type="checkbox"/> Consignee <input type="checkbox"/> Other (Name Please) <input type="checkbox"/> If Consignee Or Other (Third Party) Is Billed, Sender Remains Liable For Unpaid Charges.				<input type="checkbox"/> Depot Hand In	
IF THIS SHIPMENT CONTAINS ANY DANGEROUS GOODS ALL REGULATIONS MUST BE COMPLIED WITH. THIS IS YOUR RESPONSIBILITY AS SHIPPER. (SEE CLAUSE 12.14 OVERLEAF). GOODS ARE SHIPPED AT OWNER'S RISK. SUBJECT TO CONTRACT FOR CARRIAGE OVERLEAF. UTI DISTRIBUTION LIMITS ITS LIABILITY TO R 250.00 PER SHIPMENT. (SEE CLAUSE 12.5 OVERLEAF). IF YOU WISH UTI DISTRIBUTION TO ACCEPT A HIGHER LIABILITY, THE VALUE OF THIS SHIPMENT MUST BE DECLARED IN THE SPACE PROVIDED. (SEE CLAUSE 12.5.12.6 AND 12.7 OVERLEAF)				SENDER'S AUTHORIZED SIGNATURE: <i>Labu Meme</i> DATE: 25/10/2016	
e-mail / Fax / Proof of Delivery <input type="checkbox"/> e-mail Address / Fax Number		NO. OF PARCELS PER DIMENSIONS		LENGTH (CM)	
WIDTH (CM)		HEIGHT (CM)		Total Mass (
Total Parcels		<i>Marshall</i>		Received By UTI	
Goods received in full without damage (unless endorsed)		Name Of Receiver (PLEASE PRINT CLEARLY)		Name Of Courier (PLEASE PRINT CLEARLY)	
Date Received: 26/10/16		Time Received: 0840		Date Received: 26/10/16	
Signature: <i>[Signature]</i>		Signature: <i>[Signature]</i>		Time Received: 1645	

POD COPY

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