

CONTRACT FOR CARRIAGE / DISPATCH NOTE



UTI South Africa (Pty) Ltd
t/a UTI Distribution
PO Box 63, The Reeds 0061
Tel (012) 673-2000
Reg. No. 2004/015747/07
VAT Reg. No. 4260213873



SUBBD23683393

Sender's Details

Company Name Le Creuset Centurion
Street Address Shop 312 E
Centurion Mall
HEUWEL AVENUE
Suburb CENTURION
City / Town Pretoria Postal Code 0157
Contact SISA
Phone 012 004 0217

Consignee's Details. Full Street Address Please

Company Name Le Creuset
Street Address Unit 5 Heron Park
Olive Grove Industrial Estate
Old Paardevel Road
Suburb Somerset West
City / Town CAPE-TOWN Postal Code 7800
Contact LISA
Phone 021 851 7178

Mark Service Required

Same Day

Express

With Sunrise Option

With Saturday Service

Public Holiday Service

Economy

After Hours

BLNS
Customs
Tariff

Depot Hand In

Destination Country South Africa Botswana Lesotho Namibia Swaziland Other (Please Specify)

Sender's Reference UT10236780

Analysis Code

SPECIAL INSTRUCTIONS

Bill Charges To Account No. 027766

Bill To
Sender

Consignee

Other
(Name Please)

If Consignee Or Other (Third Party) Is Billed, Sender Remains Liable For Unpaid Charges.

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 AUTHORISED SIGNATURE

DATE

Total Mass (Kg)

e-mail / Fax / Proof of Delivery ☐ e-mail Address / Fax Number

Total Parcels

NO. OF PARCELS
PER DIMENSIONS

LENGTH (CM)

WIDTH (CM)

HEIGHT (CM)

1

Flyer

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY)

LISA

Date Received:

31/01/18

Time Received:

10:19

Signature:

LJ Beer

Received By UTi

Name Of Courier (PLEASE PRINT CLEARLY)

Date Received:

DDMMYY

Time

Signature:

POD COPY