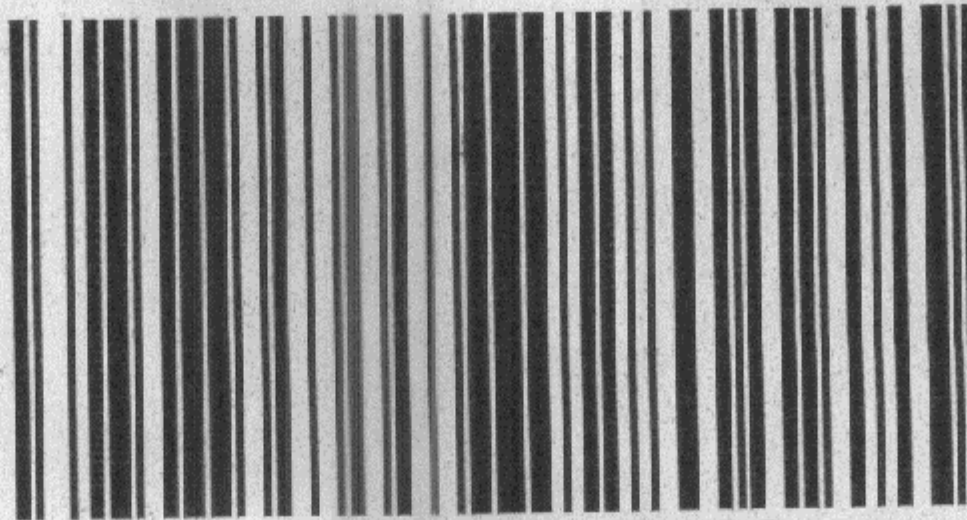


CONTRACT FOR CARRIAGE / DISPATCH NOTE



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



SUBBD26095932

S	U	B	H	T	I	1	5	3	0	5	5	7

POD COPY

Sender's Details		Consignee's Details. Full Street Address Please	
Company Name	LE CREUSET	Company Name	Le Creuset South Africa
Street Address	SHOP 105 GARDEN ROUTE MALL N2 HIGHWAY & KNYSNA RD	Street Address	Unit 5 Heron Park Olive Grove Park
Suburb	GEORGE	Suburb	Somerset West
City / Town	GEORGE (GRJ)	City / Town	Cape Town
Postal Code	6546	Postal Code	8001
Contact	ELZANNE	Contact	Jenna Pelser
Phone	044 004 0112	Phone	021 851 7178

Mark Service Required
Same Day
Express
With Sunrise Option
With Saturday Service
Public Holiday Service
Economy
After Hours

Destination Country	South Africa	Botswana	Lesotho	Namibia	Swaziland	Other (Please Specify)
Sender's Reference			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 12.4 OVERLEAF). GOODS ARE SHIPPED AT OWNERS RISK SUBJECT TO CONTRACT FOR CARRIAGE OVERLEAF. DSV DISTRIBUTION LIMITS ITS LIABILITY TO R 250.00 PER SHIPMENT. (SEE CLAUSE 12.5 OVERLEAF). IF YOU WISH DSV 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 _____

BLNS Customs Tariff
1. ONLINE <input type="checkbox"/>
3. EFT <input type="checkbox"/>

Total Mass (Kg)

Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)
2	2 Boxes			

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY)

Nasol

Date Received: **26 01 18**

Time Received: **09:30**

Signature: *[Signature]*

Received By DSV

Name Of Courier (PLEASE PRINT CLEARLY)

RONICK

Date Received: **26 01 18**

Time Received: **16:30**

Signature: *[Signature]*

