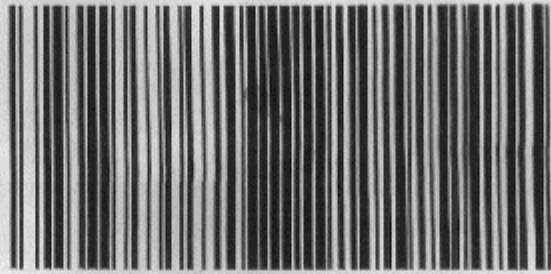


CONTRACT FOR CARRIAGE / DISPATCH NOTE



DSV Road (Pty) Ltd  
t/a DSV Distribution  
PO Box 63, The Reeds 0061  
Tel (012) 673-2000  
Reg. No. 2000/016342/07  
VAT. No. 4880189635



SUBBD27785643

2 2 2 E E E 2 2 2


Sender's Details		Consignee's Details. Full Street Address Please		Mark Service Required	
Company Name	NATASHA NAIDU	Company Name	LE CAUSEY	<input type="checkbox"/> Same Day	
Street Address	Piet Retief Road	Street Address	8 UNIT 5 HELON PARK	<input type="checkbox"/> Express	
	ERMEL		OLIVE GROVE INDUSTRIAL	<input type="checkbox"/> With Sunrise Option	
			SOMERSET WEST	<input type="checkbox"/> With Saturday Service	
Suburb		Suburb		<input type="checkbox"/> Public Holiday Service	
City / Town	ERMEL	City / Town		<input type="checkbox"/> Economy	
Postal Code	2850	Postal Code	7130	<input type="checkbox"/> After Hours	
Contact		Contact		<input type="checkbox"/> BLN Customs Tariff	
Phone	0827023826	Phone		<input type="checkbox"/> 1. ONLINE	
Destination Country	South Africa	Destination Country	Other (Please Specify)	<input type="checkbox"/> 3. EFT	
Sender's Reference		Analysis Code		Total Mass (Kg)	

SPECIAL INSTRUCTIONS

Bill Charges To Account No. 027877 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 14.14 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 14.5 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 14.5, 14.6 AND 14.7 OVERLEAF)

SENDER'S AUTHORIZED SIGNATURE

DATE

05-03-18

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

Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)
	20			

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY)

ELUINO

Date Received:

070318

Time Received:

1000

Signature:

Received By DSV

Name Of Courier (PLEASE PRINT CLEARLY)

James

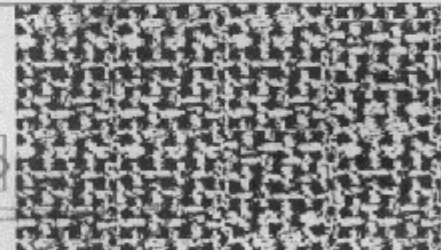
Date Received:

050318

Time Received:

1330

Signature:



POD COPY

Version Control (08/2017)