

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. 4260213973



SUBBD26508660

Sender's Details

Company Name: **LE CREUSET S.A PTY LTD**
Street Address: **SHOP 267 WOODLANDS BOULEVARD, CNR OF GARDENFONTEIN & DE VILLEBOIS, MORELETA**
Suburb: **MORELETA AFRIC**
City/Town: **PRETORIA** Postal Code: **0002**
Contact: **MARISCA**
Phone: **012 947 3177**

Consignee's Details. Full Street Address Please

Company Name: **LE CREUSET PTY LTD**
Street Address: **SHOP 417 BEDFORD CENTRE, CNR OF SMITH & VAN DER LINDE**
Suburb: **BEDFORDVIEW**
City/Town: **JOHANNESBURG** Postal Code: **2008**
Contact: **NATASHA**
Phone: **011 65 1923**

Mark Service Required

Same Day

☒ Express

With Sunrise Option

With Saturday Service

Public Holiday Service

Economy

After Hours

BLNS Customs Tariff

1. ONLINE ☐

3. EFT ☐

Total Mass (Kg)

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

Sender's Reference: **UTJ** Analysis Code

SPECIAL INSTRUCTIONS

Bill Charges To Account No: **027766** Bill To: ☐ Sender ☐ Consignee ☐ Other (Name Please)

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 12.6 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 12.6, 12.7 AND 12.7 OVERLEAF).

SENDER'S AUTHORISED SIGNATURE

DATE

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

Total Parcels

NO. OF PARCELS PER DIMENSIONS

LENGTH (CM)

WIDTH (CM)

HEIGHT (CM)

Goods received in full without damage (unless endorsed)
Name Of Receiver (PLEASE PRINT CLEARLY)

LEBOHANG

Date Received:

040418

Time Received:

0112

Received By DSV

Name Of Courier (PLEASE PRINT CLEARLY)

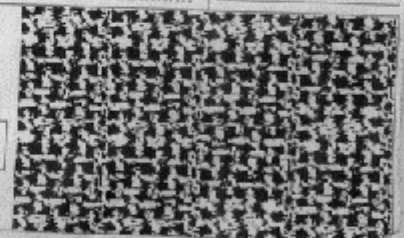
Date Received:

040418

Time Received:

Signature:

Signature: **NATASHA**



POD COPY