

CONTRACT FOR CARRIAGE / DISPATCH NOTE



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



SUBCD26250266

Sender's Details

Company Name **LE CREUSET**
Street Address **SHOP UL 262,**
PAVILION SHOPPING CENTRE
JACK MAARTENS DRIVE
Suburb **WESTVILLE**
City / Town **DUR** Postal Code **4000**
Contact **RASHREE TRISINA**
Phone **031 265 8455**

Consignee's Details. Full Street Address Please

Company Name **LE CREUSET CPI**
Street Address **UNIT 5, HERON PARK**
OLIVE GROVE IND ESTATE
SOMERSET WEST
Suburb **SOMERSET WEST (SSW)** Postal Code **8000**
City / Town **JEJONA / FRANCI**
Contact **021 851 7178**
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
Lines

Depot Hand In

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

Sender's Reference

SPECIAL INSTRUCTIONS

Bill Charges To Account No. **027766** Bill To Sender ☒ Consignee ☐ Other (Name Please) ☐
If Consignee Or 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 SUN COURIERS LIMITS ITS LIABILITY TO R250.00 PER SHIPMENT. (SEE CLAUSE 12.5 OVERLEAF). IF YOU WISH UTI SUN COURIERS TO ACCEPT A HIGHER LIABILITY, THE VALUE OF THIS SHIPMENT MUST BE DECLARED IN THE SPACE PROVIDED. (SEE CLAUSES 12.5, 12.6 AND 12.7 OVERLEAF).

SENDER'S AUTHORISED SIGNATURE

DATE

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

Dimensions In Centimetres
LENGTH WIDTH HEIGHT

Mass (kg)

Total Parcels

NO. OF PARCELS

1x Box 19

Original POD Required
P.O. Box

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY)

BASIL

Date Received:

30 05 18

Time Received:

16 920

Signature

Received by UTI

Name Of Courier (PLEASE PRINT CLEARLY)

ARON

Date Received:

30 05 18

Time Received:

16 00

Signature