

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. 4880189685



SUBBD27219369

2 2 2 E E E 2 2 2

Sender's Details		Consignee's Details. Full Street Address Please				Mark Service Required	
Company Name: <u>LeCrouset Waterfall Mall</u>		Company Name: <u>LeCrouset Mall of Africa</u>				<input type="checkbox"/> Same Day	
Street Address: <u>Shop 101, Waterfall Mall</u>		Street Address: <u>Shop 2040</u>				<input type="checkbox"/> Express	
<u>1 Angraobies Avenue</u>		<u>Cnr Allendale Road & Ben Schoeman Highway</u>				<input type="checkbox"/> With Sunrise Option	
<u>Cashan Ext 12</u>		<u>Waterfall Estate</u>				<input type="checkbox"/> With Saturday Service	
Suburb: <u>Waterfall Mall</u>		Suburb: <u>Midrand</u>				<input type="checkbox"/> Public Holiday Service	
City / Town: <u>RUSTENBURG</u> Postal Code: <u>0299</u>		City / Town: <u>Johannesburg</u> Postal Code: <u>2066</u>				<input checked="" type="checkbox"/> Economy	
Contact: <u>Manager: Lerato</u>		Contact: <u>Manager: Phindi</u>				<input type="checkbox"/> After Hours	
Phone: <u>014 537 2279</u>		Phone: <u>011 568 2077</u>				<input type="checkbox"/> BLNS Customs Tariff	
Destination Country: <u>South Africa</u>		<input type="checkbox"/> Botswana <input type="checkbox"/> Lesotho <input type="checkbox"/> Namibia <input type="checkbox"/> Swaziland <input type="checkbox"/> Other (Please Specify)				<input type="checkbox"/> 1. ONLINE <input type="checkbox"/>	
Sender's Reference: <u>SALT MILL</u>		Analysis Code: <u> </u>				<input type="checkbox"/> 3. EFT <input type="checkbox"/>	
SPECIAL INSTRUCTIONS Bill Charges To Account No. <u>027766</u> Bill To <input type="checkbox"/> Sender <input type="checkbox"/> Consignee <input type="checkbox"/> Other (Name Please) <input type="checkbox"/> 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, 14.5 AND 14.7 OVERLEAF).							
e-mail / Fax / Proof of Delivery <input type="checkbox"/>		e-mail Address / Fax Number				Total Mass (Kg) <u>1</u>	
Total Parcels <u>1</u>		NO. OF PARCELS PER DIMENSIONS		LENGTH (CM) <u>30</u>	WIDTH (CM) <u>20</u>	HEIGHT (CM) <u>4</u>	
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY) <u>TSWADI</u>				Received By DSV Name Of Courier (PLEASE PRINT CLEARLY) <u>LES ESO</u>			
Date Received: <u>310518</u>		Time Received: <u>1057</u>		Date Received: <u>300518</u>		Time Received: <u>1305</u>	
Signature: <u>[Signature]</u>				Signature: <u>[Signature]</u>			

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