

**CONTRACT FOR CARRIAGE / DISPATCH NOTE**



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



**SUBBD23490620**


**Sender's Details**

Company Name LE CREUSET Bedford  
Street Address Shop U17, Bedford Centre  
Bedford VIEW  
Suburb  
City / Town Johannesburg Postal Code 2008  
Contact Natasha  
Phone 011 615 1123

**Consignee's Details. Full Street Address Please**

Company Name  
Street Address Unit 5 Heron Park  
Olive Grove Industrial Estate  
Old Paardevlei Rd.  
Suburb Somerset West  
City / Town Cape Town Postal Code 7130  
Contact Vicky  
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

Depot Hand In

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

Sender's Reference UT10659473 Analysis Code

**SPECIAL INSTRUCTIONS**

Bill Charges To Account No.  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 12.14 OVERLEAF). GOODS ARE SHIPPED AT OWNER'S RISK, SUBJECT TO CONTRACT FOR CARRIAGE OVERLEAF. UTI DISTRIBUTION LIMITS ITS LIABILITY TO R 250.00 PER SHIPMENT. (SEE CLAUSE 12.5 OVERLEAF). IF YOU WISH UTI 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).

*[Signature]* 10/2/18  
SENDER'S AUTHORISED SIGNATURE DATE

Total Mass (Kg)

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

**Total Parcels**

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

1

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

J BENA DE

Date Received: 190218 Time Received: 1145

Signature: *[Signature]*

Received By UTI  
Name Of Courier (PLEASE PRINT CLEARLY)

UTICORR

Date Received: 021018 Time Received: 1317

Signature: *[Signature]*

POD COPY

Version Control (06/2010)