

CONTRACT FOR CARRIAGE / DISPATCH NOTE



DSV South Africa
 t/a DSV Distribution
 PO Box 63, The Reads 0081
 Tel (012) 673-2000
 Reg. No. 2004/015747/07
 VAT Reg. No. 4280213873



SUBBD24860686

POD COPY

Sender's Details		Consignee's Details. Full Street Address Please				Mark Service Required	
Company Name LE CREUSET		Company Name LE CREUSET UNIT 5 HERON PARK				<input type="checkbox"/> Same Day	
Street Address MALL OF AFRICA SHOP 2040		Street Address OLIVE GROVE IND ESTATE OLD PARROUVLET ROAD				<input type="checkbox"/> Express	
CNR ALLANDALE & BEN SCHOEMAN						<input type="checkbox"/> With Sunrise Option	
Suburb HIGHWAY - MIDRAND		Suburb SOMERSET				<input type="checkbox"/> With Saturday Service	
City / Town JNB	Postal Code 2056	City / Town CAPE TOWN	Postal Code 7130			<input type="checkbox"/> Public Holiday Service	
Contact CASSANDA		Contact NICKY				<input checked="" type="checkbox"/> Economy	
Phone 011 568 2097		Phone 021 8517178				<input type="checkbox"/> After Hours	
Destination Country		<input checked="" type="checkbox"/> South Africa <input type="checkbox"/> Botswana <input type="checkbox"/> Lesotho <input type="checkbox"/> Namibia <input type="checkbox"/> Swaziland <input type="checkbox"/> Other (Please Specify)		BLNS Customs Tariff			
Sender's Reference UT1131896A		Analysis Code				1. ONLINE <input type="checkbox"/>	
SPECIAL INSTRUCTIONS						3. EFT <input type="checkbox"/>	
Bill Charges To Account No. 027766		Bill To <input checked="" type="checkbox"/> Sender		Consignee <input type="checkbox"/>			
		Other (Name Please) <input type="checkbox"/>					
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 12.5 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 12.6, 12.6 AND 12.7 OVERLEAF).							
SENDER'S AUTHORISED SIGNATURE				16/03/2018 DATE			
e-mail / Fax / Proof of Delivery <input type="checkbox"/>		e-mail Address / Fax Number		Total Mass (Kg)			
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)		Received By DSV		Name Of Carrier (PLEASE PRINT CLEARLY)	
		A de Scar		Mpho			
Date Received:		Time Received:		Date Received:		Time Received:	
190118		0924		160318		10535	
Signature: A				Signature: [Signature]			

