

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. 4260213873



SUBBD25003772

Sender's Details		Consignee's Details. Full Street Address Please						Mark Service Required	
Company Name <u>le Creuset Cresta</u>		Company Name <u>le Creuset S.A.</u>						<input type="checkbox"/> Same Day	
Street Address <u>Shop U41</u>		Street Address <u>Unit 5 Heron Park</u>						<input type="checkbox"/> Express	
<u>Cresta Shopping Centre</u>		<u>OLIVE GROVE Industrial Park</u>						<input type="checkbox"/> With Sunrise Option	
<u>Beners Naude drive</u>		<u>Old Paardvlei Road</u>						<input type="checkbox"/> With Saturday Service	
Suburb <u>Cresta</u>		Suburb <u>Somerset West</u>						<input type="checkbox"/> Public Holiday Service	
City/Town <u>Randburg</u> Postal Code		City/Town <u>Cape Town</u> Postal Code						<input type="checkbox"/> Economy	
Contact <u>SISA</u>		Contact <u>VICKY</u>						<input type="checkbox"/> After Hours	
Phone <u>011 476 6010</u>		Phone <u>021 851 7178</u>						<input type="checkbox"/> BLNS Customs Tariff	
Destination Country		South Africa		Botswana		Lesotho		Namibia	
								Swaziland	
								Other (Please Specify)	
Sender's Reference <u>UT 1 272 4702</u>						Analysis Code			
SPECIAL INSTRUCTIONS									
Bill Charges To Account No. <u>027760</u>		Bill To Sender <input type="checkbox"/>		Consignee <input type="checkbox"/>		Other (Name Please) <input type="checkbox"/>		1. ONLINE <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 12.5, 12.6 AND 12.7 OVERLEAF).									
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		1 per							
Goods received in full without damage (unless endorsed)					Received By DSV				
Name Of Receiver (PLEASE PRINT CLEARLY)					Name Of Courier (PLEASE PRINT CLEARLY)				
<u>J BENA DE</u>					<u>EPHRAIM</u>				
Date Received:					Date Received:				
<u>04 06 18</u>					<u>01 06 18</u>				
Time Received:					Time Received:				
<u>11 00</u>					<u>15 11</u>				
Signature: <u>[Signature]</u>					Signature: <u>[Signature]</u>				
Total Mass (Kg)									

POD COPY

Version Control (06/2016)