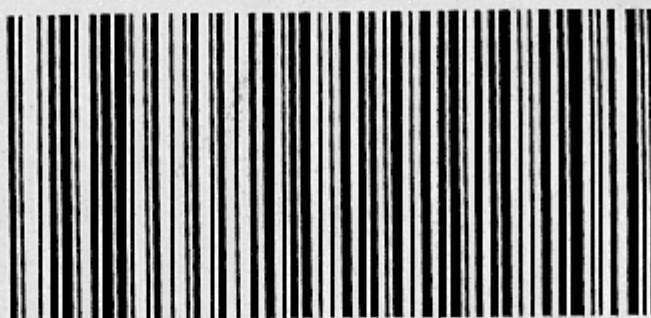


CONTRACT FOR CARRIAGE / DISPATCH NOTE



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



SUBBD25131851

5404709278984									

POD COPY

Sender's Details		Consignee's Details. Full Street Address Please	
Company Name	LE CREUSET HEAD OFFICE	Company Name	LE CREUSET WALMER
Street Address	UNIT 5, HERON PA OLIVE GROVE IND. ESTATE OLD PAARDEVLEI RD	Street Address	SHOP 103 WALMER PARK SHOP. CNTR
Suburb	SOMERSET WEST	Suburb	PORT ELIZABETH
City / Town	CPT	City / Town	PLZ
Postal Code	7130	Postal Code	6001
Contact	JASHIN FRASER	Contact	RENE NEUFELDT
Phone	021 851 7178	Phone	041 367 2318

Mark Service Required
Same Day
Express
With Sunrise Option
With Saturday Service
Public Holiday Service
Economy
After Hours
BLNS Customs Tariff

Destination Country	South Africa <input checked="" type="checkbox"/>	Botswana	Lesotho	Namibia	Swaziland	Other	(Please Specify)
Sender's Reference						Analysis Code	

**SPECIAL INSTRUCTIONS**

Bill Charges To Account No.  Bill To  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 12.4 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).

SENDER'S AUTHORISED SIGNATURE DATE

Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)
2	BOX	46	46	29
	TUBE	90	8	8

1. ONLINE	<input type="checkbox"/>
3. EFT	<input type="checkbox"/>

Total Mass (Kg)

15

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY)

Date Received:  Time Received:

Signature:

Received By DSV

Name Of Courier (PLEASE PRINT CLEARLY)

Date Received:  Time Received:

Signature:

