

CONTRACT FOR CARRIAGE / DISPATCH NOTE



DSV South Africa  
t/a DSV Distribution  
PO Box 63, The Reeds 0361  
Tel (012) 673-2000  
Reg. No. 2004/015747/07  
VAT Reg. No. 4260213873



SUBBD25131861


POD COPY

Sender's Details		Consignee's Details. Full Street Address Please	
Company Name: <b>LE CREUSET HEAD OFFICE</b>	Company Name: <b>LE CREUSET WATERCREST</b>	Street Address: <b>UNIT 5, HERON PA OLIVE GROVE IND. ESTATE OLD PAARDEVLEI RD</b>	Street Address: <b>SHOP UG04 WATERCREST MALL INANDA ROAD</b>
Suburb: <b>SOMERSET WEST</b>	Suburb: <b>WATERFALL</b>	City / Town: <b>CPT</b> Postal Code: <b>7180</b>	City / Town: <b>DUR</b> Postal Code: <b>3652</b>
Contact: <b>JASHIN FRASER</b>	Contact: <b>SIPESANDE MKETO</b>	Phone: <b>021 851 7178</b>	Phone: <b>031 763 1525</b>

Mark Service Required
Same Day
Express
With Sunrise Option
With Saturday Service
Public Holiday Service
<input checked="" type="checkbox"/> Economy
After Hours
BLNS Customs Tariff
1. ONLINE <input type="checkbox"/>
3. EFT <input type="checkbox"/>

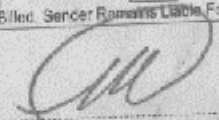
Destination Country: <input checked="" type="checkbox"/> South Africa	<input type="checkbox"/> Botswana	<input type="checkbox"/> Lesotho	<input type="checkbox"/> Namibia	<input type="checkbox"/> Swaziland	<input type="checkbox"/> Other (Please Specify)
Sender's Reference: <b>B15</b>	Analysis Code				

**SPECIAL INSTRUCTIONS**

Bill Charges To Account No. **027766** 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 12.6, 12.8 AND 12.7 OVERLEAF).

 **27-07-18**  
 SENDER'S AUTHORISED SIGNATURE DATE

Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)	Total Mass (K)
<b>1</b>	<b>180</b>	<b>36</b>	<b>32</b>	<b>50</b>	<b>12</b>

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY): **SIPESANDE**

Date Received: **30 07 14** Time Received: **1410**

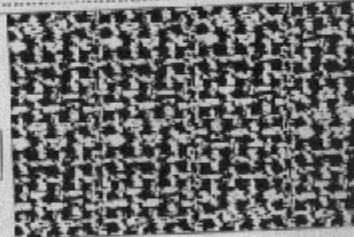
Signature: 

Received By DSV

Name Of Courier (PLEASE PRINT CLEARLY): **Mannel**

Date Received: **27 07 18** Time Received: **1740**

Signature: **Mannel**



Version Control: 06/2010