

CONTRACT FOR CARRIAGE / DISPATCH NOTE



DSV South Africa  
t/a DSV Distribution  
PO Box 83, The Reeds 0061  
Tel (012) 673-2000  
Reg. No. 2004/015747/07  
VAT Reg. No. 4280213873



SUBBD25463884


Sender's Details		Consignee's Details. Full Street Address Please				Mark Service Required	
Company Name <b>LE CREUSET BOUTIQUE STO</b>		Company Name <b>LECREUSET CANAL WALK</b>				<input type="checkbox"/> Same Day	
Street Address <b>SHOP 6197 V &amp; A WATERFRONT VICTORIA WHARF SHOP.CNT</b>		Street Address <b>Shop 176 CANAL walk Shopping Center Century City milner ton</b>				<input type="checkbox"/> Express	
Suburb <b>CAPE TOWN</b>		Suburb <b>Century City</b>				<input type="checkbox"/> With Sunrise Option	
City / Town <b>CPT</b> Postal Code <b>8001</b>		City / Town <b>Century City</b> Postal Code <b>7441</b>				<input type="checkbox"/> With Saturday Service	
Contact <b>CINDY PETERSON</b>		Contact <b>Abbey</b>				<input type="checkbox"/> Public Holiday Service	
Phone <b>021 421 8521</b>		Phone <b>021 551 0225</b>				<input type="checkbox"/> Economy	
Destination Country <input checked="" type="checkbox"/> South Africa		Other (Please Specify)				<input type="checkbox"/> After Hours	
Sender's Reference		Analysis Code				<input type="checkbox"/> BLNS Customs Tariff	
<b>SPECIAL INSTRUCTIONS</b>							
Bill Charges To Account No. <b>027766</b>		Bill To <input checked="" type="checkbox"/> Sender <input type="checkbox"/> Consignee <input type="checkbox"/> Other (Name Please)					
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 <input type="checkbox"/>				e-mail Address / Fax Number			
<b>Total Parcels</b>		<b>NO. OF PARCELS PER DIMENSIONS</b>		<b>LENGTH (CM)</b>		<b>WIDTH (CM)</b>	
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY) <b>A. VAN GADAN (unchecked)</b>				Received By DSV Name Of Courier (PLEASE PRINT CLEARLY) <b>TERENCE</b>			
Date Received: <b>22 07 18</b>		Time Received: <b>13 34</b>		Date Received: <b>19 07 18</b>		Time Received: <b>15:02</b>	
Signature: <i>A. Van Gadan</i>				Signature: <i>T. Naudoo</i>			
						<b>Total Mass (Kg)</b>	

POD COPY

Version Control (05/2016)