

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. 4260213873



SUBBD25508726

Sender's Details		Consignee's Details. Full Street Address Please				Mark Service Required	
Company Name: LE CREUSET BOUTIQUE STORE		Company Name: Le Creuset				<input type="checkbox"/> Same Day	
Street Address: SHOP 30 WATERSTONE VILLAGE S.V CNR R44 & MAIN RD		Street Address: Table Bay mall Shop G086 Table Bay mall, Cnr R27 and Berkshire Blvd Blouberg				<input type="checkbox"/> Express	
Suburb: SOMERSET WEST		Suburb: Blouberg				<input type="checkbox"/> With Sunrise Option	
City / Town: CPT Postal Code: ELIZE DU PLESSIS		City / Town: Cape Town Postal Code: 7436				<input type="checkbox"/> With Saturday Service	
Contact: 021 851 1982		Contact: Athalia				<input type="checkbox"/> Public Holiday Service	
Phone: 021 851 1982		Phone: 021 300 3148				<input checked="" type="checkbox"/> Economy	
Destination Country: South Africa		Destination Country: South Africa				<input type="checkbox"/> After Hours	
Sender's Reference: UT I 9 8 8 6 2 9 4		Analysis Code: 15 January 2018				<input type="checkbox"/> BLNS Customs Tariff	
SPECIAL INSTRUCTIONS							
Bill Charges To Account No. 027766		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 12.8 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			
Total Parcels		NO. OF PARCELS PER DIMENSIONS		LENGTH (CM)		WIDTH (CM)	
1							
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY) CANDICE				Received By DSV Name Of Consignee (PLEASE PRINT CLEARLY) ATHALIA			
Date Received: 16 01 18		Time Received: 11 15		Date Received: 15 01 18		Time Received: 16 10	
Signature: <i>[Signature]</i>				Signature: <i>[Signature]</i>			

POD COPY

15 January 2018

Athalia
SENDER'S AUTHORISED SIGNATURE

15-01-2018
DATE

Total Mass (Kg)

Athalia

Version Control (05/2016)