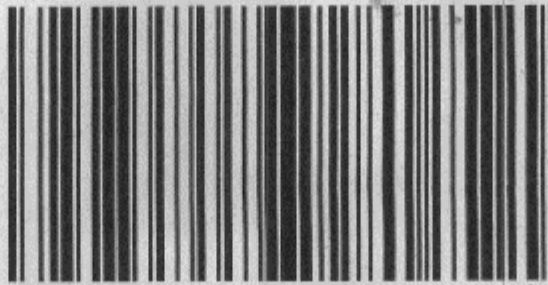


CONTRACT FOR CARRIAGE / DISPATCH NOTE



DSV South Africa
 t/a DSV Distribution
 PO Box 63, The Reeds 0081
 Tel (012) 673-2000
 Reg. No. 2004/015747/07
 VAT Reg. No. 4260213673



SUBBD26095936

Sender's Details		Consignee's Details. Full Street Address Please				Mark Service Required	
Company Name LE CREUSET		Company Name <i>Le Creuset South Africa</i>				<input type="checkbox"/> Same Day	
Street Address SHOP 105 GARDEN ROUTE MALL N2 HIGHWAY & KNYSNA RD		Street Address <i>Shop 6197 Vd A Waterfront</i>				<input type="checkbox"/> Express	
Suburb GEORGE		Suburb <i>Western Cape</i>				<input type="checkbox"/> With Sunrise Option	
City / Town GEORGE (GR) Postal Code 6546		City / Town Cape Town Postal Code 8001		<input type="checkbox"/> With Saturday Service		<input type="checkbox"/> Public Holiday Service	
Contact ELZANNE		Contact <i>Cindy</i>				<input checked="" type="checkbox"/> Exonoffy	
Phone 044 004 0112		Phone 021 421 8521				<input type="checkbox"/> After Hours	
Destination Country		South Africa		Botswana		Lesotho	
		Namibia		Swaziland		Other (Please Specify)	
Sender's Reference		Analysis Code				BLNS Customs Tariff	
SPECIAL INSTRUCTIONS							
Bill Charges To Account No. 027766		Bill To Sender <input type="checkbox"/>		Consignee <input type="checkbox"/>		Other (Name Please) <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 12.6, 12.8 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)	
HEIGHT (CM)		DATE		Total Mass (Kg)			
1		1 Flyer Bag					
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY) NANDIPHA				Received By DSV Name Of Courier (PLEASE PRINT CLEARLY) <i>[Signature]</i>			
Date Received: 310118		Time Received: 1340		Date Received: <i>[Signature]</i>		Time Received: <i>[Signature]</i>	
Signature: <i>[Signature]</i>				Signature: <i>[Signature]</i>			

POD COPY

Version Control: (06/2016)