

CONTRACT FOR CARRIAGE / DISPATCH NOTE



DSV Road (Pty) Ltd
 t/a DSV Distribution
 PO Box 63, The Reeds 0061
 Tel (012) 673-2000
 Reg. No. 2000/016342/07
 VAT No. 4880189685



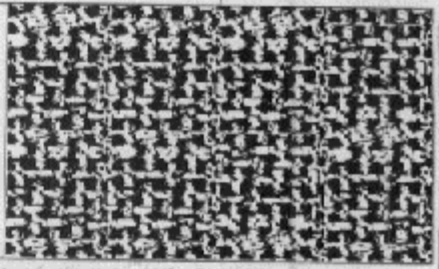
SUBBD26769116

2 2 2 E E E 2 2 2

Sender's Details		Consignee's Details. Full Street Address Please						Mark Service Required	
Company Name: Le Creuset		Company Name: LE CREUSET CPT						<input type="checkbox"/> Same Day	
Street Address: 90 William Cambell drive, sho		Street Address: UNIT 01 HERON PARK						<input type="checkbox"/> Express	
City/Town: La Lucia		City/Town: OLIVE GROVE IND ESTATE						<input type="checkbox"/> With Sunrise Option	
Suburb: Umhlanga		Suburb: OLD PAARDEUIEL ROAD						<input type="checkbox"/> With Saturday Service	
Postal Code: 4000		Postal Code: 8000						<input type="checkbox"/> Public Holiday Service	
Contact: Bill McIntosh/Marion		Contact: TENNA						<input checked="" type="checkbox"/> Economy	
Phone: 0315725045		Phone: 021 9517178						<input type="checkbox"/> After Hours	
Destination Country: South Africa		Lesotho		Namibia		Swaziland		BLNS Customs Tariff	
Sender's Reference: X		Analysis Code						<input type="checkbox"/> 1. ONLINE	
SPECIAL INSTRUCTIONS Bill Charges To Account No. 027766 Bill To <input type="checkbox"/> Sender <input type="checkbox"/> Consignee <input type="checkbox"/> Other (Name Please) <input type="checkbox"/> 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 14.14 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 14.6 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 14.5, 14.6 AND 14.7 OVERLEAF).									
e-mail / Fax / Proof of Delivery <input type="checkbox"/>		e-mail Address / Fax Number							
Total Parcels: 1		NO. OF PARCELS PER DIMENSIONS: BOX		LENGTH (CM)		WIDTH (CM)		HEIGHT (CM)	
Goods received in full without damage (unless endorsed)					Received By DSV				
Name Of Receiver (PLEASE PRINT CLEARLY): Marion					Name Of Courier (PLEASE PRINT CLEARLY): GERALD				
Date Received: 02/11/18					Date Received: 28/12/17				
Time Received: 09h00					Time Received: 1205				
Signature: [Signature]					Signature: [Signature]				

POD COPY

Total Mass (Kg)



Version Control (08/2017)