

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



SUBBD26830816

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| Sender's Details | | Consignee's Details. Full Street Address Please | | | | Mark Service Required | |
|---|--------------------------------------|---|-------------------|--------------------|--|--|--|
| Company Name: SHOP 224 | | Company Name: LE CREUSET | | | | <input type="checkbox"/> Same Day | |
| Street Address: LEONORA DRIVE LE CREUSET BALLITO JUNCTION BALLITO DOLPHIN COAST | | Street Address: UNIT 5, HERON PARK OLIVE GROVE INDUSTRIAL EST OLD PAARDEVLEI SOMERSET WEST | | | | <input checked="" type="checkbox"/> Express | |
| Suburb: DURBAN | | Suburb: SOMERSET WEST | | | | <input type="checkbox"/> With Sunrise Option | |
| City / Town: DUR Postal Code: _____ | | City / Town: CAPE TOWN Postal Code: 8001 | | | | <input type="checkbox"/> With Saturday Service | |
| Contact: SONITHA | | Contact: VICKY | | | | <input type="checkbox"/> Public Holiday Service | |
| Phone: _____ | | Phone: 021 8517178 | | | | <input type="checkbox"/> Economy | |
| Destination Country: <input 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) | | Analysis Code: _____ | | | | <input type="checkbox"/> After Hours | |
| Sender's Reference: UTII450156 | | | | | | <input type="checkbox"/> BLNS Customs Tariff | |
| SPECIAL INSTRUCTIONS | | Bill To: <input type="checkbox"/> Sender <input type="checkbox"/> Consignee <input type="checkbox"/> Other (Name Please) <input type="checkbox"/> | | | | <input type="checkbox"/> 1. ONLINE | |
| Bill Charges To Account No. 027766 | | If Consignee Or Other (Third Party) Is Billed, Sender Remains Liable For Unpaid Charges. | | | | <input type="checkbox"/> 3. EFT | |
| 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 14.5 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 14.5, 14.6 AND 14.7 OVERLEAF). | | <i>Pandy</i> SENDER'S AUTHORISED SIGNATURE | | | | DATE | |
| e-mail / Fax / Proof of Delivery <input type="checkbox"/> e-mail Address / Fax Number _____ | | | | | | Total Mass (Kg) | |
| Total Parcels | NO. OF PARCELS PER DIMENSIONS | LENGTH (CM) | WIDTH (CM) | HEIGHT (CM) | | | |
| 1 | X Flyer | | | | | | |
| Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY) J BENA DE | | Received By DSV Name Of Courier (PLEASE PRINT CLEARLY) L12W1 | | | | | |
| Date Received: 200318 | | Date Received: 190318 | | | | | |
| Time Received: 0846 | | Time Received: 1404 | | | | | |
| Signature: <i>J Benade</i> | | Signature: <i>L12W1</i> | | | | | |

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