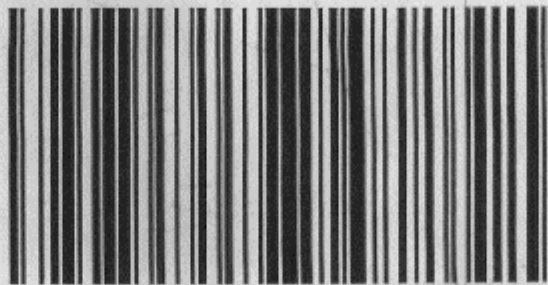


CONTRACT FOR CARRIAGE / DISPATCH NOTE

2 2 2 E E E 2 2 2



DSV Road (Pty) Ltd  
 1/4 DSV Distribution  
 PO Box 63, The Reeds 0061  
 Tel (012) 673-2000  
 Reg. No. 2000/016342/07  
 VAT. No. 4880189685



SUBBD26830840


<b>Sender's Details</b> Company Name: SHOP 224 Street Address: LEONORA DRIVE LE CREUSET BALLITO JUNCTION BALLITO DOLPHIN COAST Suburb: DURBAN City/Town: DUR Postal Code: Contact: SONITHA Phone:		<b>Consignee's Details. Full Street Address Please</b> Company Name: LE CREUSET WATERFRONT Street Address: SHOP 6197 VICTORIA WHARF CENTRE V E A WATERFRONT Suburb: City/Town: CAPE TOWN Postal Code: 8001 Contact: 021 421 8521 - CINDY Phone:				Mark Service Required <input type="checkbox"/> Same Day <input type="checkbox"/> Express <input type="checkbox"/> With Sunrise Option <input type="checkbox"/> With Saturday Service <input type="checkbox"/> Public Holiday Service <input checked="" type="checkbox"/> Economy <input type="checkbox"/> After Hours BLNS Customs Tariff
Destination Country: South Africa Botswana Lesotho Namibia Swaziland Other (Please Specify)		Sender's Reference: UT10217749 Analysis Code:				
<b>SPECIAL INSTRUCTIONS</b> Bill Charges To Account No. 027766 Bill To: <input type="checkbox"/> Sender <input type="checkbox"/> Consignee <input type="checkbox"/> Other (Name Please) 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		SENDER'S AUTHORISED SIGNATURE: <i>[Signature]</i> DATE:		Total Mass (Kg)		
<b>Total Parcels</b> NO. OF PARCELS PER DIMENSIONS LENGTH (CM) WIDTH (CM) HEIGHT (CM)		1				
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY): N A N D P H A Date Received: 31 01 18 Time Received: 13 40			Received By DSV Name Of Courier (PLEASE PRINT CLEARLY): L I Z W I Date Received: 29 01 18 Time Received: 17 00			

POD COPY

Version Control (08/2017)