

CONTRACT FOR CARRIAGE / DISPATCH NOTE



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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

SUBBD26876229


Sender's Details		Consignee's Details. Full Street Address Please	
Company Name: <b>LE CREUSET</b> <b>HOBART GROVE</b>	Company Name: <b>LE CREUSET CAVENDISH</b>	Street Address: <b>CAVENDISH SQUARE MALL</b> <b>SHOP L68</b>	Street Address: <b>CAVENDISH SQUARE MALL</b> <b>SHOP L68</b>
Street Address: <b>SHOP G1</b>	Street Address: <b>CAVENDISH SQUARE MALL</b> <b>SHOP L68</b>	Suburb: <b>CLAREMONT</b>	Suburb: <b>CLAREMONT</b>
CNR <b>HOBART &amp; GROSVENOR ROADS</b>	CNR <b>HOBART &amp; GROSVENOR ROADS</b>	City/Town: <b>LAKE TOWN</b>	City/Town: <b>LAKE TOWN</b>
Suburb: <b>BRYANSTON</b>	Suburb: <b>BRYANSTON</b>	Postal Code: <b>2021</b>	Postal Code: <b>7708</b>
City/Town: <b>JNB</b>	City/Town: <b>JNB</b>	Contact: <b>ZAAHIRI</b>	Contact: <b>ZAAHIRI</b>
Contact: <b>011 568 4708</b>	Contact: <b>011 568 4708</b>	Phone: <b>021 671 9550</b>	Phone: <b>021 671 9550</b>

Mark Service Required

Same Day

Express

With Sunrise Option

With Saturday Service

Public Holiday Service

Economy

After Hours

BLNS Customs Tariff

Destination Country	South Africa <input checked="" type="checkbox"/>	Botswana	Lesotho	Namibia	Swaziland	Other (Please Specify)
Sender's Reference: <b>UT12787697</b>	Analysis Code					

**SPECIAL INSTRUCTIONS**

Bill Charges To Account No. **027766**

Bill To  Sender  Consignee  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 14.5 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).

SENDER'S AUTHORIZED SIGNATURE: *[Signature]* DATE: **06/06/2018**

e-mail / Fax / Proof of Delivery  e-mail Address / Fax Number

Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)
<b>1</b>				

1. ONLINE

3. EFT

Total Mass (Kg)

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY): **Zeenette**

Date Received: **080618**

Time Received: **1010**

Signature: *[Signature]*

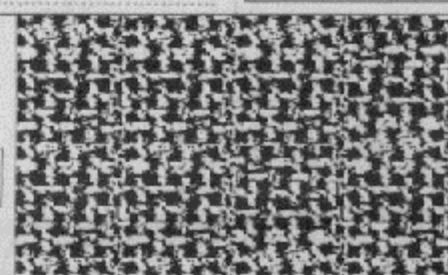
Received By DSV

Name Of Courier (PLEASE PRINT CLEARLY): **S. Cass**

Date Received: **060618**

Time Received: **1415**

Signature: *[Signature]*



POD COPY

Version Control (09/2017)