

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

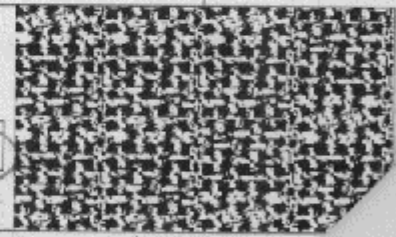


SUBBD27156697

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POD COPY

Sender's Details		Consignee's Details. Full Street Address Please				Mark Service Required	
Company Name LE CREUSET HOBART GROVE SHOP G1		Company Name LE CREUSET MALL DE AFRICA				<input type="checkbox"/> Same Day	
Street Address CNR HOBART GROSVENOR ROADS		Street Address SHOP 2040 MALL OF AFRICA C/O BEN SCIDEMAN, ALLANDALE WATERFALL ESTATE				<input type="checkbox"/> Express	
Suburb BRYANSTON		Suburb JOHANNESBURG				<input type="checkbox"/> With Sunrise Option	
City / Town JNB	Postal Code 2021	City / Town JOHANNESBURG		Postal Code		<input type="checkbox"/> With Saturday Service	
Contact SEVARIAN		Contact PHINDILE				<input type="checkbox"/> Public Holiday Service	
Phone 011 568 4708		Phone 011 568 2097				<input checked="" type="checkbox"/> Economy	
Destination Country		South Africa		Botswana		<input type="checkbox"/> After Hours	
		Lesotho		Namibia		BLNS Customs Tariff	
		Swaziland		Other (Please Specify)			
Sender's Reference 4712122829		Analysis Code				<input type="checkbox"/> 1. ONLINE <input type="checkbox"/> 3. EFT	
SPECIAL INSTRUCTIONS							
Bill Charges To Account No. 027766		Bill To <input checked="" type="checkbox"/> Sender		Consignee <input type="checkbox"/>		Total Mass (Kg)	
		Other (Name Please) <input type="checkbox"/>					
<p><small>IF THIS SHIPMENT CONTAINS ANY DANGEROUS GOODS ALL REGULATIONS MUST BE COMPLIED WITH. THIS IS YOUR RESPONSIBILITY AS SHIPPER (SEE CLAUSE 14.1 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).</small></p>							
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)	
Goods received in full without damage (unless endorsed)				Received By DSV			
Name Of Receiver (PLEASE PRINT CLEARLY) EMMA				Name Of Courier (PLEASE PRINT CLEARLY) S. Mas			
Date Received: 23 04 18		Time Received: 12 05		Date Received: 20 04 18		Time Received: 16 02	
Signature: Abane				Signature:			



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