

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



SUBBD27187582

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 Crescent Sandton	Company Name	Le Crescent			<input type="checkbox"/> Same Day	
Street Address	Shop no. L339 158 5th Street Sandton City Shopping Centre Sandton	Street Address	Unit 5, Heaton Park Industrial Estate Old Paardevlei Road.			<input checked="" type="checkbox"/> Express	
Suburb	Sandton	Suburb	Somerset West			<input type="checkbox"/> With Sunrise Option	
City / Town	JHB	City / Town	CTN	Postal Code		<input type="checkbox"/> With Saturday Service	
Contact	R. K. 2196	Contact	JENNA			<input type="checkbox"/> Public Holiday Service	
Phone	011-784-0301	Phone	011-851-7178			<input type="checkbox"/> Economy	
Destination Country	South Africa	Destination Country	Lesotho	Namibia	Swaziland	<input type="checkbox"/> After Hours	
Sender's Reference	U129906466	Analysis Code				<input type="checkbox"/> BLNS Customs Tariff	
SPECIAL INSTRUCTIONS							
Bill Charges To Account No.	027766	Bill To	<input type="checkbox"/> Sender	Consignee	<input type="checkbox"/>	Other	<input type="checkbox"/>
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).							
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)	HEIGHT (CM)	Total Mass (Kg)		
1	Flyer						
Goods received in full without damage (unless endorsed)				Received By DSV			
Name Of Receiver (PLEASE PRINT CLEARLY)				Name Of Courier (PLEASE PRINT CLEARLY)			
J B ENA DE				S. J. DE			
Date Received:				Date Received:			
17 01 18				16 01 18			
Time Received:				Time Received:			
09 30				15 03			
Signature: <i>[Signature]</i>				Signature: <i>[Signature]</i>			

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Version Control 800/0017