

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



SUBBD27409645


POD COPY

Sender's Details		Consignee's Details. Full Street Address Please	
Company Name: <b>LE CREUSET</b>	Company Name: <b>LE CREUSET SANDTON</b>	Street Address: <b>SHOP UM 30A CLEARWATER MALL</b>	Street Address: <b>SHOP L339 Sandton City Shopping Centre</b>
Suburb: <b>CHRISTIAN DE WET ROAD</b>	Suburb: <b>Sandton</b>	City/Town: <b>JNB</b> Postal Code: <b>2001</b>	City/Town: <b>JNB</b> Postal Code: <b>2196</b>
Contact: <b>ELLEN</b>	Contact: <b>KARABO</b>	Phone: <b>011 475 1202</b>	Phone: <b>011 784 0301</b>

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: <input checked="" 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)
Sender's Reference: <b>UT1</b>	Analysis Code				


**SPECIAL INSTRUCTIONS**

Bill Charges To Account No. **027766**

Bill To:  Sender  Consignee  Other (Name Please)



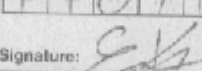
If Consignee Or Other (Third Party) Is Billed, Sender Remains Liable For Unpaid Charges

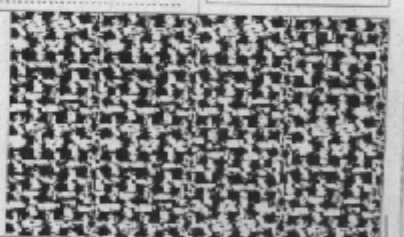
IF THIS SHIPMENT CONTAINS ANY DANGEROUS GOODS ALL REGULATIONS MUST BE COMPLIED WITH. THIS IS YOUR RESPONSIBILITY AS SHIPPER (SEE CLAUSE 14.14 OVERLEAF). GOODS ARE SHIPPED AT OWNERS RISK SUBJECT TO CONTRACT FOR CARRIAGE OVERLEAF. DSV DISTRIBUTION LIMITS ITS LIABILITY TO R 250.00 PER SHIPMENT. (SEE CLAUSE 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).


19/07/2018  
 SENDER'S AUTHORIZED SIGNATURE DATE

<input type="checkbox"/> 1. ONLINE
<input type="checkbox"/> 3. EFT
Total Mass (Kg)

Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)

Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY)  Date Received: <b>200718</b> Time Received: <b>1250</b> Signature: 	Received By DSV Name Of Courier (PLEASE PRINT CLEARLY) <b>Elias</b> Date Received: <b>190718</b> Time Received: <b>1254</b> Signature: 
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Version Control (05/2017)