

0108

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



SUBBD27557415

2 2 2 E E E 2 2 2

REPLACEMENT
5
DAMAGES

Sender's Details

Company Name: **LE CREUSET WALKER PARK SHOP 103**

Street Address: **WALKER PARK SHOPPING CENTRE WALKER PARK**

Suburb: **PORT ELIZABE** Postal Code: **6070**

City / Town: **PORT ELIZABE** Postal Code: **6070**

Contact: **RENE**

Phone: **041 367 2318**

Consignee's Details. Full Street Address Please

Company Name: **LE CREUSET WAREHOUSE**

Street Address: **UNIT 5, HERON PARK OLIVE GROVE, INDUSTRIAL ESTATE OLD PAARDEVELD SOMERSET WEST**

Suburb: **SOMERSET WEST** Postal Code: **7100**

City / Town: **CAPE TOWN** Postal Code: **7100**

Contact: **FRANCOIS JENNA**

Phone: **021 551 7178**

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 Botswana Lesotho Namibia Swaziland Other (Please Specify)

Analysis Code:

Sender's Reference:

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: **12/01/2018**

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

Total Parcels

NO. OF PARCELS PER DIMENSIONS

LENGTH (CM) **WIDTH (CM)** **HEIGHT (CM)**

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY): **ETC VIVO**

Date Received: **170718** Time Received: **0945**

Signature: *[Signature]*

Received By DSV

Name Of Courier (PLEASE PRINT CLEARLY): **ZAMA**

Date Received: **160118** Time Received: **1610**

Signature: *[Signature]*

POD COPY

Version Control (08/2017)

1. ONLINE

3. EFT

Total Mass (Kg)