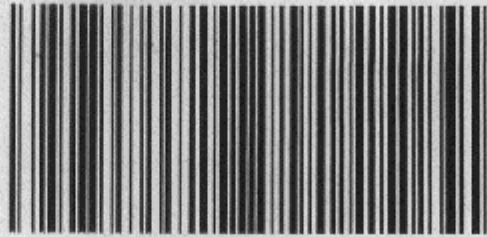


CONTRACT FOR CARRIAGE / DISPATCH NOTE




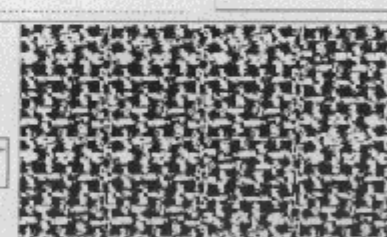
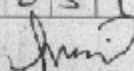
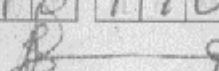
DSV Road (Pty) Ltd
t/a DSV Distribution
PO Box 63, The Reeds 0061
Tel: (012) 673-2000
Reg. No. 2000/016342/07
VAT No. 4080109685



SUBBD27561349

2 2 2 E E E 2 2 2



Sender's Details		Consignee's Details. Full Street Address Please					Mark Service Required		
Company Name	ATM SOL P/S	Company Name	ATM SOL WAREHOUSE					<input type="checkbox"/> Same Day	
Street Address	6 PRISLAND DRIVE	Street Address	7 DRUMMI STR					<input type="checkbox"/> Express	
Suburb	NARSURU	Suburb	KEVIN					<input type="checkbox"/> With Sunrise Option	
City/Town	PH	City/Town	JHB					<input type="checkbox"/> With Saturday Service	
Postal Code	H240	Postal Code						<input type="checkbox"/> Public Holiday Service	
Contact		Contact	GEORGE S					<input checked="" type="checkbox"/> Economy	
Phone		Phone						<input type="checkbox"/> After Hours	
Destination Country	South Africa <input checked="" type="checkbox"/>	Botswana	Lesotho	Namibia	Swaziland	Other	<input type="checkbox"/> BLNS Customs Tariff		
Sender's Reference		Analysis Code						<input type="checkbox"/> 1. ONLINE	
SPECIAL INSTRUCTIONS									
Bill Charges To Account No.	027766	Bill To	Consignee	Other					<input type="checkbox"/> 3. EFT
<p><small>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).</small></p>									
SENDER'S AUTHORIZED SIGNATURE 						DATE		19/5/18	
Total Mass (Kg) <input type="text"/>									
Total Parcels		NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)				
<input type="text"/>									
Goods received in full without damage (unless endorsed)				Received By DSV					
Name Of Receiver (PLEASE PRINT CLEARLY)				Name Of Courier (PLEASE PRINT CLEARLY)					
Johannes				BASIL					
Date Received:		Time Received:		Date Received:		Time Received:			
230518		0853		220518		1705			
Signature: 				Signature: 					

POD COPY

Version: Current (09/2017)