

**CONTRACT FOR CARRIAGE / DISPATCH NOTE**

DSV Road (Pty) Ltd  
 Via DSV Distribution  
 PO Box 53, The Reeds 0061  
 Tel (012) 673 2000  
 Reg. No. 2000/016342/07  
 VAT No. 4880189585



**SUBBD27574543**

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14/03/18


Sender's Details		Consignee's Details. Full Street Address Please					Mark Service Required
Company Name: <u>Le creuset Killarney</u>		Company Name: <u>Le creuset Africa</u>					<input type="checkbox"/> Same Day
Street Address: <u>Shop 100</u>		Street Address: <u>Shop 2040</u>					<input type="checkbox"/> Express
<u>Killarney Mall</u>		<u>Mall of Africa, C/o Ben Schoeman</u>					<input type="checkbox"/> With Sunrise Option
<u>Riviera Road</u>		<u>Highway &amp; Allendale Rd</u>					<input type="checkbox"/> With Saturday Service
Suburb: <u>Killarney</u>		Suburb: <u>Waterfall Estate Gauteng</u>					<input type="checkbox"/> Public Holiday Service
City/Town: <u>JHB</u> Postal Code: <u>2193</u>		City/Town: <u>JHB</u> Postal Code: <u>2066</u>					<input checked="" type="checkbox"/> Priority
Contact: <u>Natasha</u>		Contact: <u>Mindie</u>					<input type="checkbox"/> After Hours
Phone: <u>011 646 6316</u>		Phone: <u>011 568 2097</u>					<input type="checkbox"/> BLNS Customs Tariff
Destination Country: <u>South Africa</u>		Lesotho <input type="checkbox"/> Namibia <input type="checkbox"/> Swaziland <input type="checkbox"/> Other (Please Specify) <input type="checkbox"/>					<input type="checkbox"/> 1. ONLINE
Sender's Reference: <u>UT14206000</u>		Analysis Code: <u>1219340</u>					<input type="checkbox"/> 3. EFT
<b>SPECIAL INSTRUCTIONS</b>							<input type="checkbox"/> Total Mass (Kg)
Bill Charges To Account No: <u>027766</u>		Bill To: <input type="checkbox"/> Sender <input type="checkbox"/> Consignee <input type="checkbox"/> Other (Name Please) <input type="checkbox"/>					
IF THIS SHIPMENT CONTAINS ANY DANGEROUS GOODS ALL REGULATIONS MUST BE COMPLIED WITH. THIS IS YOUR RESPONSIBILITY AS SHIPPER (SEE CLAUSE 14.4 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 14.6, 14.6A AND 14.7 OVERLEAF).							
Sender's Authorized Signature: <u>Zoboranga</u>					DATE: <u>12.03.2018</u>		
e-mail / Fax / Proof of Delivery <input type="checkbox"/> e-mail Address / Fax Number							
<b>Total Parcels</b>		NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)		
<u>1 BOX</u>							
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY) <u>PHINDILE</u>				Received By DSV Name Of Courier (PLEASE PRINT CLEARLY) <u>SPECIAL</u>			
Date Received: <u>140318</u>		Time Received: <u>1330</u>		Date Received: <u>130318</u>		Time Received: <u>1419</u>	
Signature: <u>[Signature]</u>				Signature: <u>[Signature]</u>			

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Control (000/117)