

CONTRACT FOR CARRIAGE / DISPATCH NOTE



DSV Road (Pty) Ltd
t/a DSV Distribution
PO Box 53, The Reeds, 0061
Tel (012) 673 2000
Reg. No. 2000/016342/07
VAT No. 4880189685



SUBBD27729413

2 2 2 E E E 2 2 2



Sender's Details		Consignee's Details. Full Street Address Please			
Company Name	BAY TREE HOME 4 DECOR	Company Name	LE CRUESSET		
Street Address	SHOP 44 SOUTH COAST MALL	Street Address	UNIT 004, BLOCK 2 CASTGATE BUSINESS PARK CNR. MARLEBOURGH DRIVE + SOUTH R		
Suburb	SHELLY BEACH	Suburb	SANDTON		
City/Town	SHELLY BEACH / Postal Code 4242	City/Town	JOHANNESBURG / Postal Code		
Contact	INGRID	Contact	JOHN KOLLER		
Phone	039 315 0015	Phone	083 251 7457		
Destination Country	South Africa <input checked="" type="checkbox"/> Botswana	Lesotho	Namibia	Swaziland	Other (Please Specify)
Sender's Reference	BAY TREE	Analysis Code			

Mark Service Required

Same Day

Express

With Sunrise Option

With Saturday Service

Public Holiday Service

Economy

After Hours

BLNS Customs Tariff

SPECIAL INSTRUCTIONS

Bill Charges To Account No. Bill To 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).

W. Olmesdale 15.1.19
SENDER'S AUTHORIZED SIGNATURE DATE

1. ONLINE

3. EFT

Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)
1	1	40	30	10

Total Mass (Kg)
1kg

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY)
THE ABUSE

Date Received: 06/01/19
Time Received: 1923

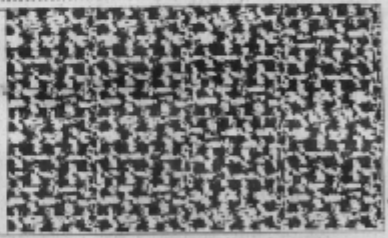
Signature: *[Signature]*

Received By DSV

Name Of Courier (PLEASE PRINT CLEARLY)
SIBONELO

Date Received: 15/01/19
Time Received: 1600

Signature: *[Signature]*



POD COPY

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PO Box 63, The Reeds 0061
Tel (012) 673-2000
Reg. No. 2000/016342/07
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SUBBD27729413

2 2 2 E E E 2 2 2



Sender's Details		Consignee's Details. Full Street Address Please						Mark Service Required	
Company Name: BAY TREE HOME 4 DECOR		Company Name: LE CRUSET						Same Day	
Street Address: SHOP 44		Street Address: UNIT 004 BLOCK 2						Express	
SOUTH COAST MALL		CASTGATE BUSINESS PARK						With Sunrise Option	
Suburb: SHELLY BEACH		Suburb: SAJDTON						With Saturday Service	
City / Town: SHELLY BEACH Postal Code: 4242		City / Town: JOHANNESBURG Postal Code: _____						Public Holiday Service	
Contact: INGRID		Contact: JOHN KOLLER						Economy	
Phone: 039 315 0015		Phone: 083 251 7457						After Hours	
Destination Country: South <input checked="" type="checkbox"/> Africa		Lesotho <input type="checkbox"/> Namibia <input type="checkbox"/> Swaziland <input type="checkbox"/> Other (Please Specify) _____						BLNS Customs Tariff	
Sender's Reference: BAY TREE		Analysis Code: _____						1. ONLINE <input type="checkbox"/>	
SPECIAL INSTRUCTIONS		If Consignee Or Other (Third Party) Is Billed, Sender Remains Liable For Unpaid Charges.						3. EFT <input type="checkbox"/>	
Bill Charges To Account No. _____		Bill To Sender <input type="checkbox"/> Consignee <input type="checkbox"/> Other (Name Please) _____						Total Mass (Kg) <div style="font-size: 2em; text-align: center;">1kg</div>	
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 14.6, 14.6 AND 14.7 OVERLEAF).		SENDER'S AUTHORISED SIGNATURE: <i>U. Olmesdal</i> DATE: 15.1.19							
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)	
1		1		160		30		10	
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY): THE M&Y GISE				Received By DSV Name Of Courier (PLEASE PRINT CLEARLY): SIBONKHO					
Date Received: 16/01/19		Time Received: 09:23		Date Received: 15/01/19		Time Received: 16:00			
Signature: <i>[Signature]</i>				Signature: <i>[Signature]</i>					

POD COPY

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