

CONTRACT FOR CARRIAGE / DISPATCH NOTE



DSV Road (Pty) Ltd  
 tra DSV Distribution  
 PO Box 63, The Reeds 0061  
 Tel (012) 673-2000  
 Reg. No. 2000/016342/07  
 VAT. No. 4880189685



SUBBD27862146

2 2 2 E E E 2 2 2


Sender's Details		Consignee's Details. Full Street Address Please					
Company Name	LE CREUSER	Company Name	LE CREUSER				
Street Address	G 158 1 Palm Boulevard Gateway Shopping Centre	Street Address	UNIT 5, HERON PARK OLIVE GROVE INDUSTRIAL ESTATE OLD PAARDEVELD ROAD				
Suburb	Umhlanga	Suburb	SOMERSET WEST				
City / Town	DURBAN	City / Town	CAPE TOWN				
Postal Code	4000	Postal Code	7129				
Contact	SASHA	Contact	JENNA / FRANK				
Phone	031 100 1239	Phone	021 851 7178				
Destination Country	South Africa	Botswana	Lesotho	Namibia	Swaziland	Other (Please Specify)	
Sender's Reference	UTI						

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  Sender  Consignee  Other (Name Please)

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

1. ONLINE

3. EFT

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).

*[Signature]* 29/01/18  
 SENDER'S AUTHORISED SIGNATURE DATE

Total Mass (Kg)

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

Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)
1	L x BOX			

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY)

EIVINO

Date Received: 31/01/18 Time Received: 0920

Signature: *[Signature]*

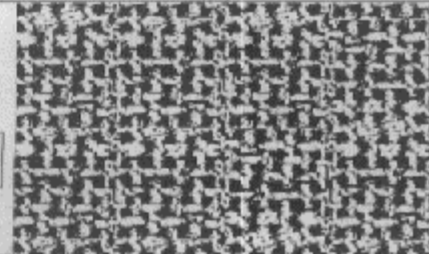
Received By DSV

Name Of Courier (PLEASE PRINT CLEARLY)

MAOLISI

Date Received: Time Received:

Signature: *[Signature]*



POD COPY

Version Control (00/20/17)