

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



SUBBD27866237

2 2 2 E E E 2 2 2


Sender's Details		Consignee's Details. Full Street Address Please	
Company Name	L. LEPPAN	Company Name	LeCreuset SA
Street Address	111 MAIN RD	Street Address	Unit 5 Heron Park Olive Grove Old Paardekraai Rd
Suburb	GONWISIE	Suburb	Somerset West
City / Town	EAST LONDON	City / Town	SOMERSET WEST
Postal Code	5257	Postal Code	7130
Contact	L. LEPPAN	Contact	MARY / YOLANDA
Phone	013 827 8569	Phone	021 851 7178 / 021 300 1779
Destination Country	<input checked="" type="checkbox"/> South Africa	Other	(Please Specify)
Other Countries	<input type="checkbox"/> Botswana <input type="checkbox"/> Lesotho <input type="checkbox"/> Namibia <input type="checkbox"/> Swaziland		
Sender's Reference		Analysis Code	

Mark Service Required

Same Day

Express

With Sunrise Option

With Saturday Service

Public Holiday Service

Economy

After Hours

BLNS Customs Tariff

1. ONLINE

3. EFT

**SPECIAL INSTRUCTIONS**

Bill Charges To Account No. **027877**

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).

*[Signature]*  
SENDER'S AUTHORISED SIGNATURE

26/01/2018  
DATE

Total Mass (Kg)

**2**

Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)
<b>1</b>		<b>15</b>	<b>10</b>	<b>1</b>

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY)

*[Signature]*

Date Received: **30 01 18**

Time Received: **1408**

Signature: *[Signature]*

Received By DSV

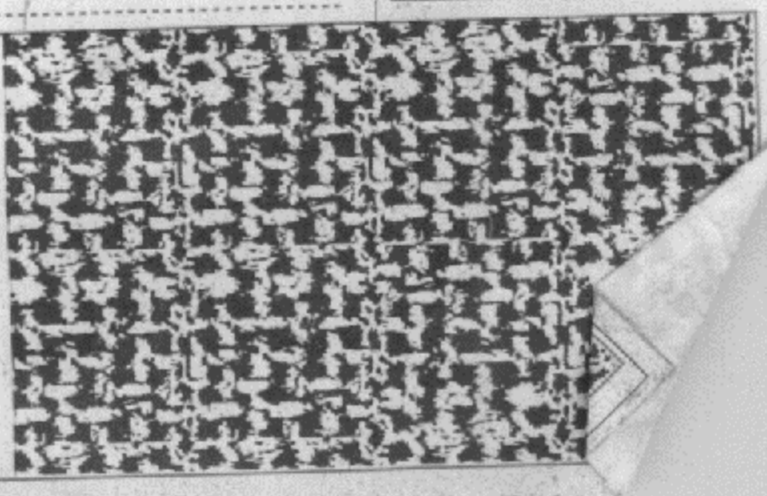
Name Of Courier (PLEASE PRINT CLEARLY)

**T MAN**

Date Received: **26 01 18**

Time Received: **1230**

Signature: *[Signature]*



POD COPY

Version Control (08/2017)