

**CONTRACT FOR CARRIAGE / DISPATCH NOTE**

2 2 2 E E E 2 2 2



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



**SUBBD27985595**


Sender's Details		Consignee's Details. Full Street Address Please					
Company Name	Le cresset	Company Name	Le cresset				
Street Address	Sandton city Shopping centre Shop 2339, Sandhurst	Street Address	Units Drive Grove Ind Old Paarlville Road				
Suburb	Sandhurst	Suburb	Somerset West				
City / Town	JHB	City / Town	Cape Town				
Contact	Sarah	Contact	Semi				
Phone	(011) 740301	Phone	(021) 851-1778				
Destination Country	South Africa	Other (Please Specify)					
Sender's Reference	UTLIS25287						

**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. **027766**

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**

**22/03/2018**  
**DATE**

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	Box			

**Total Mass (Kg)**

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY)

**ECV/NO**

Date Received: **26/03/18**

Time Received: **1015**

Signature: *[Signature]*

Received By DSV

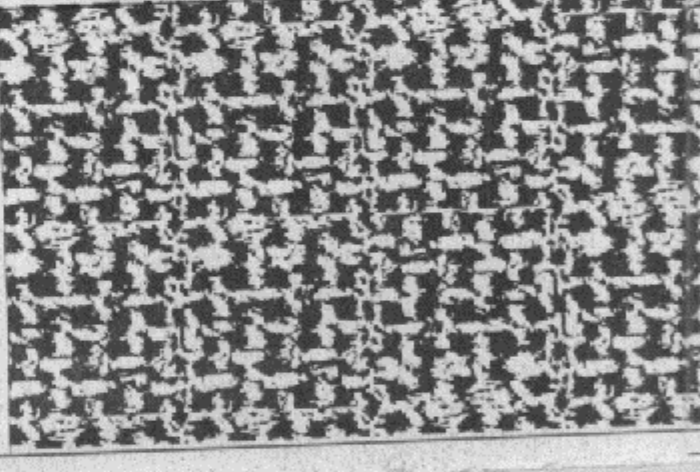
Name Of Courier (PLEASE PRINT CLEARLY)

**Clare**

Date Received: **27/03/18**

Time Received: **1550**

Signature: *[Signature]*



POD COPY

Version Control (08/2017)