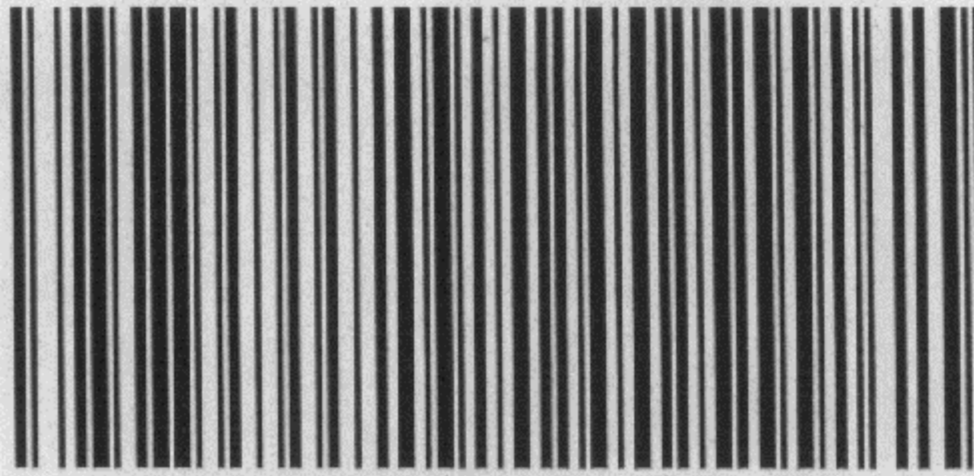


CONTRACT FOR CARRIAGE / DISPATCH NOTE

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



SUBBD28131468

Sender's Details		Consignee's Details. Full Street Address Please						Mark Service Required	
Company Name LE CREUSET		Company Name LE CREUSET (ONLINE)						<input type="checkbox"/> Same Day	
Street Address SHOP 312E HEUNEL AVE. CENTURION MALL		Street Address UNIT 5 HERON PARK OLIVE GROVE INDUSTRIAL ESTATE OLD PARADEWEI ROAD						<input type="checkbox"/> Express	
Suburb CENTURION		Suburb SOMERSET WEST						<input type="checkbox"/> With Sunrise Option	
City / Town PRETORIA Postal Code 0157		City / Town CAPE TOWN Postal Code 8001						<input type="checkbox"/> With Saturday Service	
Contact EUREKA		Contact YOLANDA (ONLINE)						<input type="checkbox"/> Public Holiday Service	
Phone 02 004 0217		Phone 021 851 7178						<input checked="" type="checkbox"/> Economy	
Destination Country <input checked="" type="checkbox"/> South Africa		<input type="checkbox"/> Botswana		<input type="checkbox"/> Lesotho		<input type="checkbox"/> Namibia		<input type="checkbox"/> Swaziland	
Other (Please Specify)		Analysis Code						<input type="checkbox"/> After Hours	
Sender's Reference UT12711984								BLNS Customs Tariff	
SPECIAL INSTRUCTIONS									
Bill Charges To Account No. 027766		Bill To <input type="checkbox"/> Sender		Consignee <input type="checkbox"/>		Other (Name Please) <input type="checkbox"/>		1. ONLINE <input type="checkbox"/>	
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).									
SENDER'S AUTHORIZED SIGNATURE <i>[Signature]</i>						DATE 31/05/2018			
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		10							
Goods received in full without damage (unless endorsed)					Received By DSV				
Name Of Receiver (PLEASE PRINT CLEARLY) Yolanda					Name Of Courier (PLEASE PRINT CLEARLY) Eze Kic				
Date Received: 04 06 18		Time Received: 10 45			Date Received: 31 05 18		Time Received: 13 15		
Signature: <i>[Signature]</i>					Signature: <i>[Signature]</i>				

POD COPY

Version Control (08/2017)

Total Mass (Kg)

