

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



SUBBD28212346

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Sender's Details

Consignee's Details. Full Street Address Please

Company Name **LE CREUSET BRYANSTON**
Street Address **SHOP G1
CNR HOBART & GROSVENOR ROADS**
Suburb **BRYANSTON**
City/Town **JNB** Postal Code **2021**
Contact **SEVARIAN**
Phone **011 568 4708**

Company Name **LECREUSET**
Street Address **Shop 202 A
Rosebank Mall
50 Bath Avenue**
Suburb **Rosebank**
City/Town **JHB** Postal Code **2196**
Contact **ELLEN**
Phone **011 568 4745**

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

Total Mass (Kg)

Destination Country	<input checked="" type="checkbox"/> South Africa	<input type="checkbox"/> Botswana	<input type="checkbox"/> Lesotho	<input type="checkbox"/> Namibia	<input type="checkbox"/> Swaziland	<input type="checkbox"/> Other (Please Specify)
Sender's Reference	Analysis Code					

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).

SENDER'S AUTHORIZED SIGNATURE *[Signature]* DATE **20/07/18**

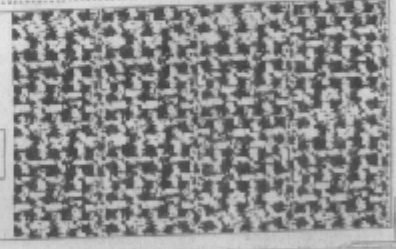
Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)
1				

Goods received in full without damage (unless endorsed)
Name Of Receiver (PLEASE PRINT CLEARLY)
Ntombi
Date Received: **250718** Time Received: **1100**

Received By DSV
Name Of Courier (PLEASE PRINT CLEARLY)
Silias
Date Received: **240718** Time Received: **1255**

Signature:

Signature: *[Signature]*



POD COPY

Version Control (08/2017)