

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



SUBBD28275996

ADDITIONAL
TRACKING
NUMBERS

Sender's Details				Consignee's Details. Full Street Address Please						Mark Service Required			
Company Name LE CREUSET				Company Name Le Creuset						<input type="checkbox"/> Same Day			
Street Address BROOKLYN MALL SHOP 318 BROOKLYN MALL CNR VAELE & WATERKLOOF ROAD				Street Address Cnr Hobart & Groenor Road Hobart Grove Shop G1						<input type="checkbox"/> Express			
Suburb BROOKLYN - PRETORIA				Suburb Broomspan						<input type="checkbox"/> With Sunrise Option			
City / Town PTA		Postal Code		City / Town JHB		Postal Code 2021		<input type="checkbox"/> With Saturday Service					
Contact FATIMA				Contact Serian						<input type="checkbox"/> Public Holiday Service			
Phone 012 346 2840				Phone 011 568 4708						<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		<input type="checkbox"/> Other (Please Specify)	
Sender's Reference assessment				Analysis Code									
SPECIAL INSTRUCTIONS													
Tarrif Code		027766		Bill To <input type="checkbox"/> Sender		<input checked="" type="checkbox"/> Consignee		Other (Name Please) <input type="checkbox"/>					
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 1000.00 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).													
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		Box											

BLNS
Customs
Tariff

1. ONLINE

3. EFT

[Signature]
SENDER'S AUTHORISED SIGNATURE

11-7-18
DATE

Total Mass (Kg)

Goods received in full without damage (unless endorsed)				Received By DSV			
Name Of Receiver (PLEASE PRINT CLEARLY) WOM + SR				Name Of Courier (PLEASE PRINT CLEARLY) Danford			
Date Received: 120718		Time Received: 1219		Date Received: 110718		Time Received: 1549	
Signature: <i>[Signature]</i>				Signature: <i>[Signature]</i>			

POD COPY

