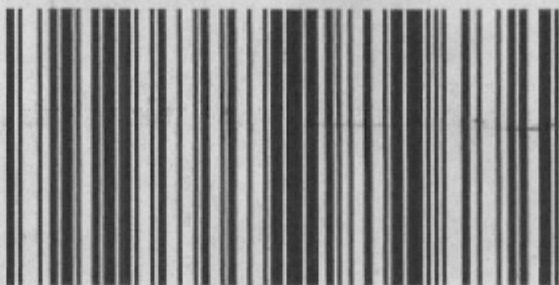


CONTRACT FOR CARRIAGE / DISPATCH NOTE

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



SUBBD28386064

ADDITIONAL
TRACKING
NUMBERS

Sender's Details

Consignee's Details. Full Street Address Please

Mark Service Required

Company Name **LE CREUSET LA LUCIA**
Street Address **SHOPO3, 90 WILLIAM CAMPBELL**
LA LUCIA MALL
DURBAN NORTH
Suburb
City / Town **DUR** Postal Code **4000**
Contact
Phone **031 5725045**

Company Name **LE CREUSET CPT**
Street Address **UNIT 211 HERON PARK**
OLIVE GROVE IND ESTATE
OLD PARADEWIND ROAD
SOMERSET WEST
Suburb
City / Town **CAPE TOWN** Postal Code **8000**
Contact
Phone **021 851 7178**

- Same Day
- Express
- With Sunrise Option
- With Saturday Service
- Public Holiday Service
- Economy
- After Hours

Destination Country South Africa Botswana Lesotho Namibia Swaziland Other (Please Specify)

Sender's Reference **UT1** Analysis Code

SPECIAL INSTRUCTIONS

Tarif Code **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 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)

SENDER'S AUTHORISED SIGNATURE **[Signature]** DATE **19/01/19**

BLNS Customs Tariff

1. ONLINE

3. EFT

Total Mass (Kg)

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** **30**

Goods received in full without damage (unless endorsed)
Name Of Receiver (PLEASE PRINT CLEARLY)

BASIL

Date Received: **21 01 19** Time Received: **10 00**

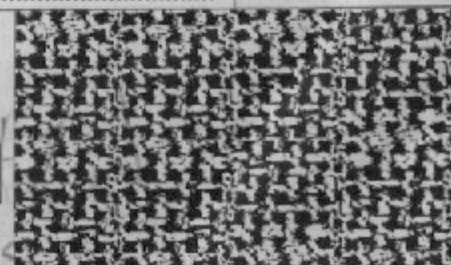
Signature: **[Signature]**

Received By DSV
Name Of Courier (PLEASE PRINT CLEARLY)

[Signature]

Date Received: **18 01 19** Time Received: **14 30**

Signature: **[Signature]**



POD COPY

Version Control (01/2018)