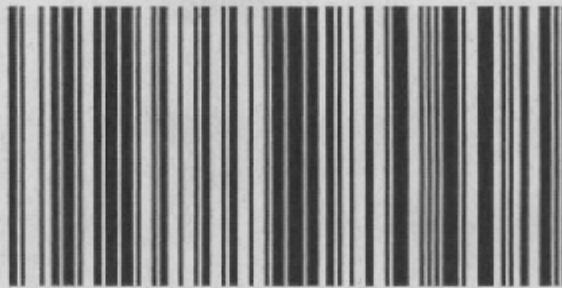


CONTRACT FOR CARRIAGE / DISPATCH NOTE

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



SUBBD28386295

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 UNIT 01, HERON PARK OLIVE GROVE IND ESTATE OLD PAARDEUIEI ROAD DURBAN NORTH**
Suburb
City / Town **DUR** Postal Code **4000**
Contact
Phone **0315725045**

Company Name **LE CREUSET CPT**
Street Address **SHOPO3, 90 WILLIAM CAMPBELL UNIT 01, HERON PARK OLIVE GROVE IND ESTATE OLD PAARDEUIEI ROAD DURBAN NORTH**
Suburb **SOMERSET PARK**
City / Town **CAPE TOWN JENNA** Postal Code **8000**
Contact
Phone **021 8517178**

Same Day

Express

With Sunrise Option

With Saturday Service

Public Holiday Service

Economy

After Hours

BLNS
Customs
Tariff

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

Sender's Reference **UT 1** Analysis Code

SPECIAL INSTRUCTIONS **ATT. JENNA - DAMAGES**

Tariff 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 AUTHORIZED SIGNATURE

DATE

17/07/2018

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**

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

BASIL

Date Received: **190718** Time Received: **1020**

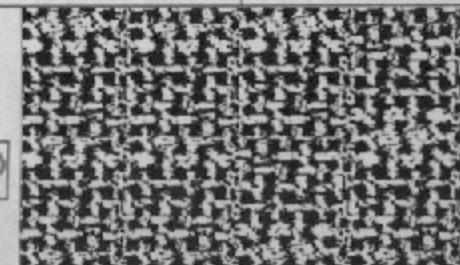
Signature:

Received By DSV
Name Of Courier (PLEASE PRINT CLEARLY)

Gerald

Date Received: **190718** Time Received: **1510**

Signature:



POD COPY

Version Control (01/2018)