

CONTRACT FOR CARRIAGE / DISPATCH NOTE

2 2 2 E E E 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



SUBBD28484186

ADDITIONAL
TRACKING
NUMBERS

Sender's Details		Consignee's Details. Full Street Address Please			
Company Name	Le creuset ntenlyn	Company Name	Le creuset		
Street Address	shop 12 January maibele and Amerson Drive.	Street Address	Unit 5 Haron park Old roadvlei Rd olive Crate Industrial Estate		
Suburb	Waterloof Ext 2	Suburb	Santred west		
City/Town	Preterio	City/Town	Cape Town	Postal Code	8001
Contact	Toni	Contact	Yolanda		
Phone	012 004 0082	Phone	021 851 7178		
Destination Country	South Africa	Lesotho	Namibia	Swaziland	Other (Please Specify)
Sender's Reference	UT11992728				Analysis Code

Mark Service Required

Same Day

With Sunday Option

With Saturday Service

Public Holiday Service

Economy

After Hours

BLNS Customs Tariff

SPECIAL INSTRUCTIONS

Tariff Code 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)

[Signature] 16/04/2018
SENDER'S AUTHORISED SIGNATURE DATE

1. ONLINE

3. EFT

Total Mass (K)

e-mail / Fax / Proof of Delivery e-mail Address / Fax Number

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

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY)

Date Received: Time Received:

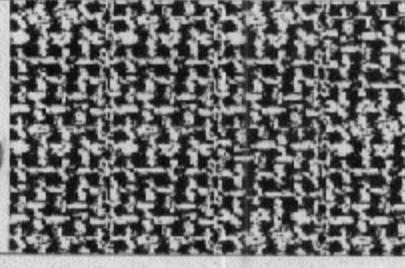
Signature: *[Signature]*

Received By DSV

Name Of Courier (PLEASE PRINT CLEARLY)

Date Received: Time Received:

Signature: *[Signature]*



POD COPY

Version Control (01/2018)