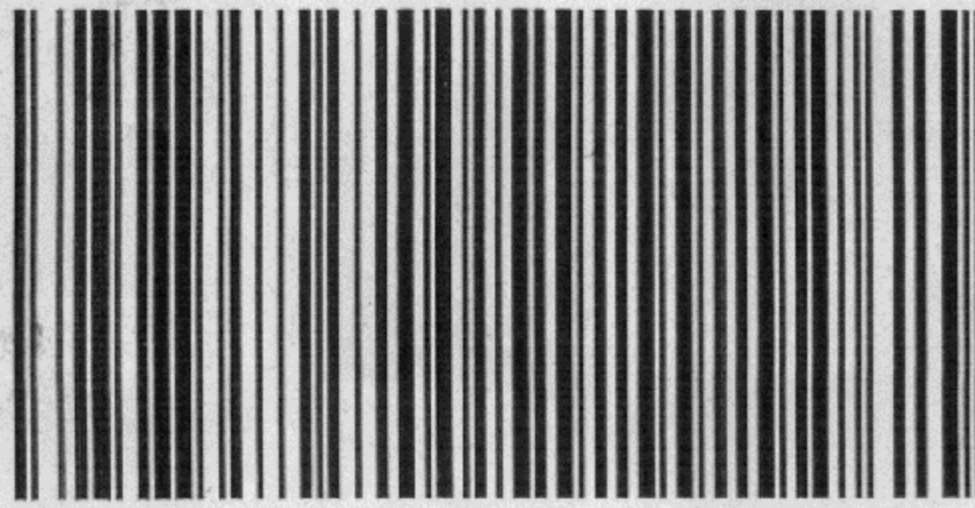


CONTRACT FOR CARRIAGE / DISPATCH NOTE



UTi South Africa (Pty) Ltd
 t/a UTi Sun Couriers
 PO Box 63, The Reeds 0061
 Tel (012) 673-2000
 Reg. No. 2004/015747/07
 VAT Reg. No. 4260213873



SUBCD29086865

POD COPY

Sender's Details		Consignee's Details. Full Street Address Please					Mark Service Required	
Company Name LE CREUSET PAVILLION		Company Name LE CREUSET GATEWAY					<input type="checkbox"/> Same Day	
Street Address JACK HARTENS DRIVE WESTVILLE DURBAN		Street Address SHOP 6086 1 PALM BOULEVARD GATEWAY THEATRE OF SHOPPING UMHLANGA					<input type="checkbox"/> Express	
Suburb		Suburb					<input type="checkbox"/> With Sunrise Option	
City / Town DUR Postal Code 4000		City / Town DURBAN Postal Code					<input type="checkbox"/> With Saturday Service	
Contact TRISINA RASHREE		Contact CASSANDRA RASHA					<input type="checkbox"/> Public Holiday Service	
Phone 031 265 8455		Phone 031-1001039					<input checked="" type="checkbox"/> Economy	
Destination Country		Destination Country					<input type="checkbox"/> After Hours	
South Africa		South Africa					<input type="checkbox"/> BLNS Customs Tariff Lines	
Botswana		Botswana					<input type="checkbox"/> Depot Hand In	
Lesotho		Lesotho					<input type="checkbox"/> Original POD Required P.O. Box	
Namibia		Namibia						
Swaziland		Swaziland						
Other (Please Specify)		Other (Please Specify)						
Sender's Reference UTI1805657		Analysis Code						
SPECIAL INSTRUCTIONS								
Bill Charges To Account No. 027766		Bill To <input checked="" type="checkbox"/> Sender <input type="checkbox"/> Consignee <input type="checkbox"/> Other (Name Please) <input type="checkbox"/>						
If Consignee Or 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 12.14 OVERLEAF) GOODS ARE SHIPPED AT OWNER'S RISK, SUBJECT TO CONTRACT FOR CARRIAGE OVERLEAF. UTI SUN COURIERS LIMITS ITS LIABILITY TO R250.00 PER SHIPMENT. (SEE CLAUSE 12.5 OVERLEAF). IF YOU WISH UTI SUN COURIERS TO ACCEPT A HIGHER LIABILITY, THE VALUE OF THIS SHIPMENT MUST BE DECLARED IN THE SPACE PROVIDED. (SEE CLAUSES 12.5, 12.6 AND 12.7 OVERLEAF).								
e-mail / Fax / Proof of delivery <input type="checkbox"/>				e-mail Address / Fax Number				
Total Parcels		Dimensions In Centimetres			Mass (kg)			
NO. OF PARCELS		LENGTH WIDTH HEIGHT			Mass (kg)			
1		1 X FLTR						
Goods received in full without damage (unless endorsed)				Received by UTI				
Name Of Receiver (PLEASE PRINT CLEARLY)				Name Of Courier (PLEASE PRINT CLEARLY)				
SASHA				AARON				
Date Received:		Time Received:		Date Received:		Time Received:		
10 04 15 Y		11 21 01 PM		09 04 15 Y		11 51 01 AM		
Signature				Signature				

Lithotech SJ (011) 474-1828 Version Control (10/2012) - SUN030/14 10/12