

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



SUBBD28386059

Sender's Details		Consignee's Details. Full Street Address Please		Mark Service Required	
Company Name LE CREUSET LA LUCIA		Company Name Le Creuset Pavilion		<input type="checkbox"/> Same Day	
Street Address SHOP03, 90 WILLIAM CAMPBELL LA LUCIA MALL DURBAN NORTH		Street Address Shop UL 262, Pavilion Shopping Center Jack Mardens Drive		<input type="checkbox"/> Express	
Suburb		Suburb		<input type="checkbox"/> With Sunrise Option	
City / Town DUR	Postal Code 4000	City / Town Durban	Postal Code 3629	<input type="checkbox"/> With Saturday Service	
Contact		Contact Ateng		<input type="checkbox"/> Public Holiday Service	
Phone 031 5725045		Phone 031 265 8055		<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)				<input type="checkbox"/> After Hours	
Sender's Reference Customer damages.		Analysis Code		BLNS Customs Tariff	
SPECIAL INSTRUCTIONS					
Tariff Code 027766		Bill To <input type="checkbox"/> Sender <input type="checkbox"/> Consignee <input type="checkbox"/> Other (Name Please) <input type="checkbox"/>		1. ONLINE <input type="checkbox"/>	
		If Consignee Or Other (Third Party) Is Billed, Sender Remains Liable For Unpaid Charges.		3. EFT <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		BENDER'S AUTHORISED SIGNATURE Spangco DATE 11/01/19	
Total Parcels		NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)
1		1	Box		
Goods received in full without damage (unless endorsed)		Received By DSV			
Name Of Receiver (PLEASE PRINT CLEARLY)		Name Of Courier (PLEASE PRINT CLEARLY)			
A+isha		Spangco			
Date Received:		Date Received:			
1040119		1034			
Time Received:		Time Received:			
1034		1400			
Signature: JADE		Signature:			

POD COPY

Version Control (01/2019)