

CONTRACT FOR CARRIAGE / DISPATCH NOTE



DSV Road (Pty) Ltd
1/a DSV Distribution
PO Box 63, The Reeds 0061
Tel (012) 673-2000
Reg. No. 2000/016342/07
VAT. No. 4880189685



SUBBD28616768

2 2 2 E E E 2 2 2

Sender's Details

Company Name **LE CREUSET**
Street Address **SHOP UL262**
PAVILION SHOPPING CENTRE
WESTVILLE
Suburb
City / Town **OUR** Postal Code **4000**
Contact **TRIGINA LATEHA**
Phone **031-2658455**

Consignee's Details. Full Street Address Please

Company Name **LE CREUSET CPT**
Street Address **UNIT 5 HERON PARK**
OLIVE GROVE ESTATE
Suburb **SOMERSET WEST**
City / Town **SOMERSET WEST (SSW)** Postal Code **8000**
Contact **VICKI**
Phone **021 851 7178**

Mark Service Required

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 Analysis Code

SPECIAL INSTRUCTIONS

DAILY BANKING

Tariff Code **027766** Bill To ☐ 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

DATE

16/01/2019

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 x FL-1CP

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

Cerisa

Date Received:

170119

Time Received:

0943

Signature:

CA Venter

Received By DSV

Name Of Courier (PLEASE PRINT CLEARLY)

AORON

Date Received:

160119

Time Received:

1612

Signature:

[Signature]

Total Mass (Kg)

