

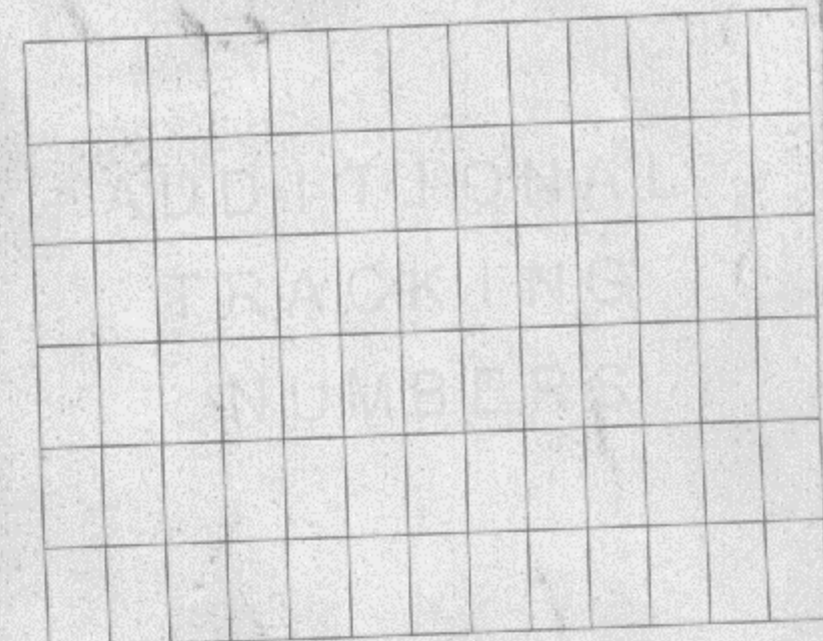
CONTRACT FOR CARRIAGE / DISPATCH NOTE



DSV South Africa
t/a DSV Distribution
PO Box 63, The Reeds 0061
Tel (012) 673-2000
Reg. No. 2004/015747/07
VAT Reg. No. 4260213873



SUBBD26095957



Sender's Details		Consignee's Details. Full Street Address Please				Mark Service Required	
Company Name LE CREUSET		Company Name Le Creuset South Africa				<input type="checkbox"/> Same Day	
Street Address SHOP 105 GARDEN ROUTE MALL N2 HIGHWAY & KNYSNA RD		Street Address Unit 1, Heron Park, Olive Grove Industrial Estate Old Bonteheuwel Road				<input type="checkbox"/> Express	
Suburb GEORGE		Suburb Somerset West				<input type="checkbox"/> With Sunrise Option	
City / Town GEORGE (GR)		City / Town Cape Town				<input type="checkbox"/> With Saturday Service	
Postal Code 6546		Postal Code 8001				<input type="checkbox"/> Public Holiday Service	
Contact ELZANNE		Contact MANCI				<input checked="" type="checkbox"/> Economy	
Phone 044 004 0112		Phone 021 851 7178				<input type="checkbox"/> After Hours	
Destination Country		South Africa <input checked="" type="checkbox"/>		Botswana		<input type="checkbox"/> BLNS Customs Tariff	
Lesotho		Namibia		Swaziland		<input type="checkbox"/> 1. ONLINE	
Other		Analysis Code				<input type="checkbox"/> 3. EFT	
Sender's Reference							
SPECIAL INSTRUCTIONS							
Bill Charges To Account No. 027766		Bill To <input type="checkbox"/> Sender		Consignee <input type="checkbox"/>		Other (Name Please) <input type="checkbox"/>	
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 12.4 OVERLEAF). GOODS ARE SHIPPED AT OWNERS RISK SUBJECT TO CONTRACT FOR CARRIAGE OVERLEAF. DSV DISTRIBUTION LIMITS ITS LIABILITY TO R 250.00 PER SHIPMENT. (SEE CLAUSE 12.5 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 12.5, 12.6 AND 12.7 OVERLEAF).							
e-mail / Fax / Proof of Delivery <input type="checkbox"/>		e-mail Address / Fax Number		SENDER'S AUTHORISED SIGNATURE Mandy		DATE 10/05/2018	
Total Parcels		NO. OF PARCELS PER DIMENSIONS		LENGTH (CM)		WIDTH (CM)	
1		1xBox					
						HEIGHT (CM)	
Goods received in full without damage (unless endorsed)				Received By DSV			
Name Of Receiver (PLEASE PRINT CLEARLY)				Name Of Courier (PLEASE PRINT CLEARLY)			
ELZANNE				DSV			
Date Received: 14/05/18				Date Received: 11/05/18			
Time Received: 1020				Time Received: 1827			
Signature:				Signature:			