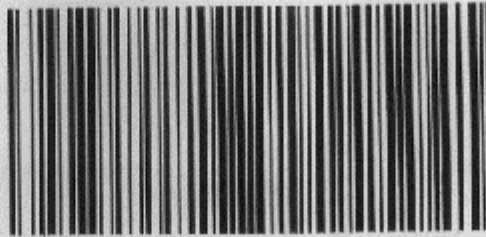


CONTRACT FOR CARRIAGE / DISPATCH NOTE

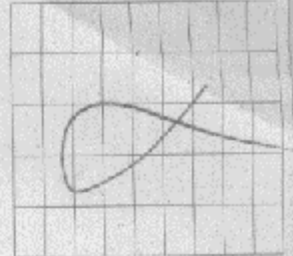


DSV Road (Pty) Ltd
t/a DSV Distribution
PO Box 63, The Reeds 0061
Tel (012) 673-2000
Reg. No. 2006/016342/07
VAT No. 4880189685



SUBBD27561345

2 2 2 E E E 2 2 2



Sender's Details		Consignee's Details. Full Street Address Please		Mark Service Required	
Company Name	ATM SOL PU	Company Name	ATM SOL WAREHOUSE	<input type="checkbox"/> Same Day	
Street Address	6 PEISSLAND	Street Address	7 DELPUI STR.	<input type="checkbox"/> Express	
	DE		EX 7 18	<input type="checkbox"/> With Sunrise Option	
Suburb	MARLBOROUGH	Suburb	KENIL	<input type="checkbox"/> With Saturday Service	
City / Town	PTJ	City / Town	JAB.	<input type="checkbox"/> Public Holiday Service	
Postal Code		Postal Code		<input type="checkbox"/> Economy	
Contact		Contact		<input type="checkbox"/> After Hours	
Phone		Phone		<input type="checkbox"/> BLNS Customs Tariff	
Destination Country	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"/> 1. ONLINE	
Sender's Reference		Analysis Code		<input type="checkbox"/> 3. EFT	
SPECIAL INSTRUCTIONS Bill Charges To Account No 02 22 61 Bill To Consignee <input type="checkbox"/> Other (Name Please) <input type="checkbox"/> If Consignee Or Other (Third Party) Is Billed, Sender Remains Liable For Unpaid Charges.				10/6/18 SENDER'S AUTHORIZED SIGNATURE DATE	
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 250.00 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).				Total Mass (Kg)	
e-mail / Fax / Proof of Delivery <input type="checkbox"/> e-mail Address / Fax Number				08	
Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)	
1	1				
Goods received in full without damage (unless endorsed)		Received By DSV			
Name Of Receiver (PLEASE PRINT CLEARLY)		Name Of Courier (PLEASE PRINT CLEARLY)			
GEORGES		ALEX			
Date Received: 9 06 18		Date Received: 18 06 18			
Time Received: 08 29		Time Received: 15 49			
Signature: [Signature]		Signature: [Signature]			

POD COPY

201/1