

# 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. 2000/016342/07  
VAT. No. 4880189685



SUBBD29065001

2 2 2 E E E 2 2 2

ADDITIONAL  
TRACKING  
NUMBERS

## Sender's Details

Company Name **DRIVE CONTROL CORP.**  
Street Address **20 MILKY WAY AVE**  
**LINBRO BUSINESS PARK**  
**FRANKENWALD**  
Suburb **SANDTON**  
City / Town **JOHANNESBURG** Postal Code  
Contact **COURIER COLLECTION GATE**  
Phone **011 201 8101**

## Consignee's Details. Full Street Address Please

Company Name **LE CREUSET** 16  
Street Address **5 HERON PARK**  
**OLIVE GROVE INDUSTRIAL ESTATE**  
**OLD PAARDEVELD ROAD**  
Suburb  
City / Town **SOMERSET WEST** Postal Code **7130**  
Contact **VICEY**  
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

Lesotho

Namibia

Swaziland

Other

(Please Specify)

Sender's Reference

2256092

Analysis Code

## SPECIAL INSTRUCTIONS

Tariff Code

027766

Bill To  
Sender ☐

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

Total Mass (Kg)

e-mail / Fax / Proof of Delivery ☐

e-mail Address / Fax Number

Total Parcels

NO. OF PARCELS  
PER DIMENSIONS

LENGTH (CM)

WIDTH (CM)

HEIGHT (CM)

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY)

**Nach**

Date Received:

15 06 18

Time Received:

0944

Signature:

Received By DSV

Name Of Courier (PLEASE PRINT CLEARLY)

**MSI**

Date Received:

15 06 18

Time Received:

2148

Signature:

POD COPY

Version Control 10/12/18