

DSV

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



SUBBD25871479

ADDIT. 2 NA
FRAG. 5
TUMS 5
Tackling

POD COPY

Sender's Details		Consignee's Details. Full Street Address Please				Mark Service Required	
Company Name LE CREUSET		Company Name Le Creuset				<input checked="" type="checkbox"/> Same Day	
Street Address UNIT 7, OUDE HOEK CNR CHURCH & ANDRINGA STREET STELLENBOSCH		Street Address The Constantia Village Shop 100, Constantia Main Road and Spoeningsmacht Road				<input checked="" type="checkbox"/> Express	
Suburb		Suburb Constantia				<input type="checkbox"/> With Sunrise Option	
City / Town CAPE TOWN Postal Code 7140		City / Town Cape Town Postal Code 7700				<input type="checkbox"/> With Saturday Service	
Contact CHERYL		Contact 021 794 3615				<input type="checkbox"/> Public Holiday Service	
Phone 021 300 3168		Phone				<input type="checkbox"/> Economy	
Destination Country		<input 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		Analysis Code				<input type="checkbox"/> BLNS Customs Tariff	
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					
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) GARNETTE				Received By DSV Name Of Courier (PLEASE PRINT CLEARLY) Reli			
Date Received: 26/07/18				Date Received: 25/07/18			
Time Received: 13/2/13				Time Received: 12/33			
Signature: [Signature]				Signature: [Signature]			

1. ONLINE ☐

 3. EFT ☐

 Total Mass (Kg)

Product Control (05/2019)

Version Control (DEV/2016)