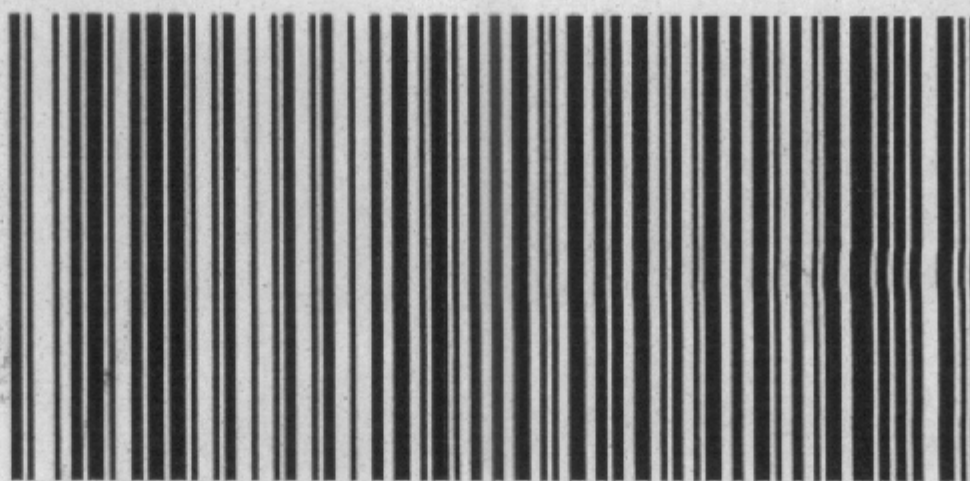


CONTRACT FOR CARRIAGE / DISPATCH NOTE



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



SUBBD28212363

2 2 2 E E E 2 2 2

POD COPY

Sender's Details		Consignee's Details. Full Street Address Please	
Company Name	LE CREUSET BRYANSTON	Company Name	LE CREUSET TYGER VALLEY
Street Address	SHOP G1 CNR HOBART & GROSVENOR ROADS	Street Address	SHOP 513 UPPER LEVEL, TYGER VALLEY CENTRE BILL BEZUIDENHOUT ROAD
Suburb	BRYANSTON	Suburb	BEUVILLE
City / Town	JNB	City / Town	CAPE TOWN
Postal Code	2021	Postal Code	7530
Contact	SEVARIAN	Contact	LIZ - MARIE
Phone	011 568 4708	Phone	021 914 754 7053

Mark Service Required
Same Day
Express
With Sunrise Option
With Saturday Service
Public Holiday Service
Economy
After Hours
BLNS Customs Tariff

Destination Country	<input checked="" 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)
Sender's Reference			Analysis Code			

SPECIAL INSTRUCTIONS

Bill Charges To Account No. **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 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).

[Signature]
SENDER'S AUTHORISED SIGNATURE

DATE

1. ONLINE	<input type="checkbox"/>
3. EFT	<input type="checkbox"/>

Total Mass (Kg)

Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)
1				

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY)

Lizemarie

Date Received: **300718** Time Received: **1436**

Signature: *[Signature]* (unchecked)

Received By DSV

Name Of Courier (PLEASE PRINT CLEARLY)

S-pho

Date Received: **260718** Time Received: **1715**

Signature: *[Signature]*

