SKYNET SABS ISO 9002
SOUTH AFRICA (Pty) Ltd

HEAD OFFICE
P.O. BOX 8237
JOHANNESBURG 2000
SOUTH AFRICA
TEL (011) 980-1000
FAX (011) 974-1272

VAT REG. NO. 4510226708
ITC. NO. 2011/010410/07

00939850610

File No. | Origin | Date / | Collection

Shipper's Account Number: 517989 | Shipper's Reference Number:

To (Receivers Name): ATM Stores | Receiver's Phone Number:

Shipper (Contact Name): Piet | Your Fleet No. / Vehicle: 082720700A

Company name: ATM Solutions

Company Name: ATM Solutions

Street Address: (P.O. Boxes or mail deliveries) P.O. BOX INVALID. BOX DELIVERIES

Street Address: (Depot use) 1695 Sepothorp

City: Kimberley | Postal Code:

City: KIB | Postal Code:

Country: SA

Country: SA

SPECIAL INSTRUCTIONS / ADDITIONAL SERVICES (PLEASE SPECIFY)

INTERNATIONAL - BUDGET FREIGHT SERVICES (ONLY FOR THE FOLLOWING DESTINATIONS)

BOTSWANA ☐ | LESOTHO ☐ | SWAZILAND ☐ | MOZAMBIQUE ☐ | NAMIBIA ☐

Customs Value | Insurance Value

INTERNATIONAL SERVICES

COURIER DOCUMENT EXPRESS ☐ | AIRMAIL ☐

COURIER PARCEL EXPRESS ☐ | AIRFREIGHT ☐

DOMESTIC SERVICES

OVERNIGHT EXPRESS BY 10H00 ☐ | BUREAU CARGO ☐

OVERNIGHT BY 16H00 ☐ | SAME DAY EXPRESS ☐

NO. OF PKGS	DESCRIPTION OF PACKAGING AND CONTENTS	DIMENSIONS (CENTIMETRES) LENGTH	DEPTH	HEIGHT	VOL WEIGHT KG	ACTUAL WEIGHT KG
3	ATM MACHINES	197	58	47	120	360
1	SIGNBOARD	120	6	46		7

FREIGHT CHARGES

FUEL SURCHARGE		
OTHER:		
INSURANCE		
SAME DAY COURIER		
TOTAL EXCL. VAT		
VAT		
TOTAL INCL. VAT	R	

HAZARDOUS GOODS? YES ☐ NO ☐

SATURDAY DELIVERY FOR DOMESTIC SERVICES ONLY YES ☐ NO ☐

INSURANCE REQUIRED ABOVE R1 000? YES ☐ NO ☐

DELIVERY BY 9AM? YES ☐ NO ☐

WE HAVE READ AND AGREE TO BE BOUND BY THE STANDARD CONDITIONS OF CONTRACT ON THE REVERSE HEREOF.

SIGNATURE: Piet

RECEIVED BY (SKYNET REPRESENTATIVE)

SIGNATURE: Sel

DATE: 17/2 TIME:

PERSON WITH KNOWLEDGE OF CONSIGNMENT

SIGNATURE: GEORGES

DATE: 17/2/20 TIME: 11:25

PARCEL STICKERS

P.O.D. - DEST. COPY

IT IS THE RESPONSIBILITY OF THE ADDRESSEE, SENDER AND ALL OTHER PERSONS HAVING AN INTEREST IN THE CONSIGNMENT TO PROTECT IT FROM DAMAGE

PLEASE COMPLETE ALL SHADED AREAS AS INDICATED