

# CONTRACT FOR CARRIAGE / DISPATCH NOTE



UTI South Africa (Pty) Ltd  
t/a-UTI-Distribution  
PO Box 83, The Reeds 0061  
Tel (012) 673-2000  
Reg. No. 2004/015747/07  
VAT Reg. No. 4260213873



SUBBD23490615

Frame


Sender's Details		Consignee's Details. Full Street Address Please	
Company Name	Le Creuset	Company Name	Le Creuset
Street Address	Bedford Centre Shop 1017	Street Address	Unit 5 Heron Park Olive Grove Industrial Estate
Suburb	Bedfordview	Suburb	Old Paardevlei rd.
City / Town	JHB	City / Town	Cape Town
Postal Code	2008	Postal Code	7130
Contact	Hila	Contact	Lauren (Frame)
Phone	011 6151923	Phone	021 8517172
Destination Country	South Africa	Lesotho	Namibia
	Botswana	Swaziland	Other (Please Specify)
Sender's Reference	UT1 0441551	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 12.14 OVERLEAF). GOODS ARE SHIPPED AT OWNER'S RISK, SUBJECT TO CONTRACT FOR CARRIAGE OVERLEAF. UTI DISTRIBUTION LIMITS ITS LIABILITY TO R 250.00 PER SHIPMENT. (SEE CLAUSE 12.5 OVERLEAF). IF YOU WISH UTI 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).

07.02.2018

SENDER'S AUTHORISED SIGNATURE

DATE

e-mail / Fax / Proof of Delivery ☐ e-mail Address / Fax Number

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)

ELVINO

Date Received: 090218

Time Received: 0940

Signature: [Signature]

Received By UTI

Name Of Courier (PLEASE PRINT CLEARLY)

TLOU

Date Received: 070218

Time Received: 1430

Signature: [Signature]

Total Mass (Kg)