CONTRACT FOR CARRIAGE / DISPATCH NOTE



UTI South Africa (Pty) Ltd t/a UTI Distribution PO Box 63, The Reeds 0061 Tel (012) 673-2000 Reg. No. 2004/015747/07 VAT Reg. No. 4260213873



SUBBD23490626



	; OQDDD20400020	
Sender's Details	Consignee's Details, Full Street Address Ple	ase Mark Service Required
Company Name LC CICUSET	company Name Le Celleset Baywer	Same Day
Street Address Bedford Crentre	Street Address Baywest Mall U	Express
Shap 417	1.443	With Sunrise Option
Smith and Vander Lind	e N2 Walker drive	With Saturday Service
suburb Bedfordview	Suburb	Public Holiday Service
City/Town THR Postal Code 20	00	Ol Protiony
Contact NII C		After Hours
Phone (011) 615 1923	/ Phone 041 004 0011	
		Customs
Destination Country South Africa Bots	wana Lesotho Namibia Swaziland Other	ise Specify) Tartiff
Sender's Reference UTI 9711	723 Analysis Code	Depot Hand In
SPECIAL INSTRUCTIONS		ledas Piedas
To Account No. 0 2 7 7 6 6 Send		HI HI
IF THIS SHIPMENT CONTAINS ANY DANGEROUS GOODS	nsignee Or Other (Third Party) is Billed, Sender Remains Liable For Unpaid Charges.	
BE COMPLIED WITH. THIS IS YOUR RESPONSIBILITY AS 12.14 OVERLEAF). GOODS ARE SHIPPED AT OWNER'S RISK	SHIPPER (SEE CLAUSE	
FOR CARRIAGE OVERLEAF. UTI DISTRIBUTION LIMITS IT	S LIABILITY TO R 250.00	.01.08
TO ACCEPT A HIGHER LIABILITY, THE VALUE OF THE DECLARED IN THE SPACE PROVIDED. (SEE CLAUSE 12.5.1	S SHIPMENT MUST BE SENDER'S AUTHORISED SIGNATURE 2.6 AND 12.7 OVERLEAF)	DATE Total Mass (Kg)
e-mail / Fax / Proof of Delivery e-mail Address / Fi	ax Number	
Total Parcels NO. OF PARCELS PER DIMENSIONS	LENGTH (CM) HE	GHT(CM)
Goods received in full without damage (unl	ess endorsed) Received By UTi	
Name Of Receiver (PLEASE PRINT CLEARLY)	Name Of Courier (PLEASE PRINT CLEARLY)	
Date Received: Date Received: Time Received: Time Received: Time Received:		
1) O O In: 1: 9:	Time Received: Date Received:	Time Received:
The state of the s		
Signature:	Signature	. [