

**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



**SUBBD23817556**

SUBHT11025408					
ADDITIONAL					
TRACKING					
NUMBERS					

POD COPY

Sender's Details		Consignee's Details. Full Street Address Please				Mark Service Required
Company Name	LE CREUSET DBN	Company Name	LE CREUSET CPT			Same Day
Street Address	SHOP UL 262 PAVILION SHOPPING CENTER JACK MAARTENS DRIVE	Street Address	UNIT 5 HERON PARK OLIVE GROVE OLD PAARDEVLEI ROAD			Express
Suburb	WESTVILLE	Suburb	SOMERSET WEST			With Sunrise Option
City / Town	DUR	City / Town	CAPE TOWN (CPT)			With Saturday Service
Postal Code	4000	Postal Code	8000			Public Holiday Service
Contact	TRISINA / ATISHA	Contact	CARMEN			Economy <input checked="" type="checkbox"/>
Phone	031 265 8455	Phone	021 851 7178			After Hours

Destination Country	South Africa	Botswana	Lesotho	Namibia	Swaziland	Other (Please Specify)
Sender's Reference	CPT 073 UT 14337616				Analysis Code	

**SPECIAL INSTRUCTIONS**

Bill Charges To Account No.  Bill To  Sender  Consignee  Other (Name Please)  **027766**

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).

SENDER'S AUTHORIZED SIGNATURE: *[Signature]* DATE: 22/08/18

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

Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)
2	2 X BOXES			

Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY) CARMEN Date Received: 17/08/18 Time Received: 10:05 Signature: <i>[Signature]</i>	Received By UTi Name Of Courier (PLEASE PRINT CLEARLY) AARON Date Received: 22/08/18 Time Received: 16:20 Signature: <i>[Signature]</i>
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