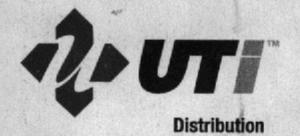
## **CONTRACT FOR CARRIAGE / DISPATCH NOTE**



Signature:

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





Sender's Details  Consignee's Details. Full Street Address Please  Company Name. ( C. U. P. U. S. Everica Requirements of the Service Requirem	ption
Street Address Shop 2 Menyn Street Address Shop 101 Material Express With Sunrise Of Maine Tanuary Mall Augrables Avenue With Sunrise Of With Sunrise Of With Sunrise Of Maine Please To Account No.  Street Address Shop 2 Menyn Street Address Shop 101 Material Stree	ption
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Suburb Noter 100 F EXT Z Suburb R Water all Park  City / Town Property Postal Code O.I. S. City / Town Rusten burg Postal Code After Hours  Contact From Destination Country South Africa Botswana Lesotho Namibia Swaziland Other (Please Specify)  Sender's Reference Destination Country South Africa Botswana Lesotho Namibia Swaziland Other (Please Specify)  Sender's Reference Destination Country South Africa Botswana Lesotho Namibia Swaziland Other (Please Specify)  Sender's Reference Destination Country 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 COMPULED WITH. THIS IS YOUR RESPONSIBILITY AS SHIPPER, (SEE CLAUSE)	
Suburb Not-terk 100 F EXT Z Suburb Rusters I Park  City/Town Rusters burg Postal Code  Contact Contact Contact Phone O 1 Z 00 4 00 8 Phone  Destination Country South Africa Botswana Lesotho Namibia Swaziland Other (Please Specify)  Sender's Reference To 10 2 Z 5 3 Analysis Code  Bill Charges To Account No. O 2 T 1 C 6 Bill To Sender (Name Please)  If THIS SHIPMENT CONTAINS ANY DANGEROUS GOODS ALL RESPONSIBILITY AS SHIPPER (SEE CLAUSE AND SHIPPER (SEE CLAUSE)	ervice
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Phone Destination Country South Africa Botswana Lesotho Namibia Swaziland Other Please Specify Sender's Reference Analysis Code Depot Hand I SPECIAL INSTRUCTIONS  Bill Charges To Account No. Description of Consignee Of 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	
Destination Country  South Africa  Botswana  Lesotho  Namibia  Swaziland.  Other  (Please Specify)  Tariff  Depot Hand I  SPECIAL INSTRUCTIONS  Bill Charges To Account No.  Depot Hand I  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	
SPECIAL INSTRUCTIONS  Bill Charges To Account No. O C G G G G G G G G G G G G G G G G G G	
Bill Charges To Account No.    Data   Garder   Consignee   Other (Name Please)	n
To Account No. O Sender No. O S	
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 AUTHORISED SIGNATURE  Total Mass	(Kg
e-mail / Fax / Proof of Delivery e-mail Address / Fax Number /	
Total Parcels  NO. OF PARCELS PER DIMENSIONS  LENGTH (CM)  WIDTH (CM)  HEIGHT(CM)	
Goods received in full without damage (unless endorsed)  Repeived By UTi	
Name Of Receiver (PLEASE PRINT CLEARLY)  Name Of Courier (PLEASE PRINT CLEARLY)	7
LERA 10	
Date Received:  Date Received:  Date Received:  Date Received:  Date Received:  Date Received:	7

Signature: