

CONTRACT FOR CARRIAGE / DISPATCH NOTE



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



SUBBD24860738

Sender's Details		Consignee's Details. Full Street Address Please				Mark Service Required	
Company Name LE CREUSET		Company Name LE CREUSET HEAD OFFICE				<input type="checkbox"/> Same Day	
Street Address MALL OF AFRICA SHOP 2040 CNR ALLANDALE & BEN SCHOEMAN		Street Address UNIT 05, HERON PARK OLIVE GROVE INDUSTRIAL				<input checked="" type="checkbox"/> Express	
Suburb HIGHWAY -MIDRAND		Suburb SOMERSET NEST				<input type="checkbox"/> With Sunrise Option	
City / Town JNB Postal Code 2066		City / Town CAPE TOWN Postal Code				<input type="checkbox"/> With Saturday Service	
Contact CASSANDA		Contact Vicky				<input type="checkbox"/> Public Holiday Service	
Phone 011 568 2097		Phone 021 851 7178				<input type="checkbox"/> Economy	
Destination Country <input checked="" type="checkbox"/> South Africa		Other (Please Specify)				<input type="checkbox"/> After Hours	
Sender's Reference FILE		Analysis Code				BLNS Customs Tariff	
SPECIAL INSTRUCTIONS							
Bill Charges To Account No. 027766		Bill To <input checked="" type="checkbox"/> Sender		Consignee <input type="checkbox"/>		Other (Name Please) <input type="checkbox"/>	
IF THIS SHIPMENT CONTAINS ANY DANGEROUS GOODS ALL REGULATIONS MUST BE COMPLIED WITH. THIS IS YOUR RESPONSIBILITY AS SHIPPER (SEE CLAUSE 12.4 OVERLEAF). GOODS ARE SHIPPED AT OWNERS RISK SUBJECT TO CONTRACT FOR CARRIAGE OVERLEAF. DSV DISTRIBUTION LIMITS ITS LIABILITY TO R 250.00 PER SHIPMENT. (SEE CLAUSE 12.5 OVERLEAF). IF YOU WISH DSV 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).							
e-mail / Fax / Proof of Delivery <input type="checkbox"/>				e-mail Address / Fax Number			
Total Parcels		NO. OF PARCELS PER DIMENSIONS		LENGTH (CM)		WIDTH (CM)	
1							
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY) Maclere				Received By DSV Name Of Courier (PLEASE PRINT CLEARLY) MASHENO			
Date Received: 04/01/18		Time Received: 0835		Date Received: 03/01/18		Time Received: 0940 PM	
Signature:				Signature:			

POD COPY

Version Control (06/2016)

Total Mass (Kg)

