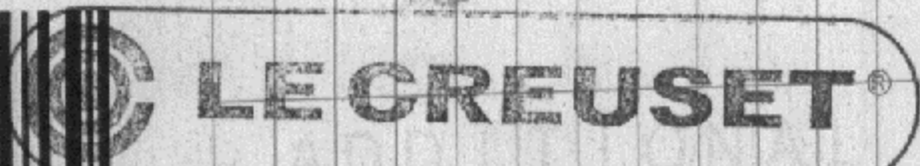
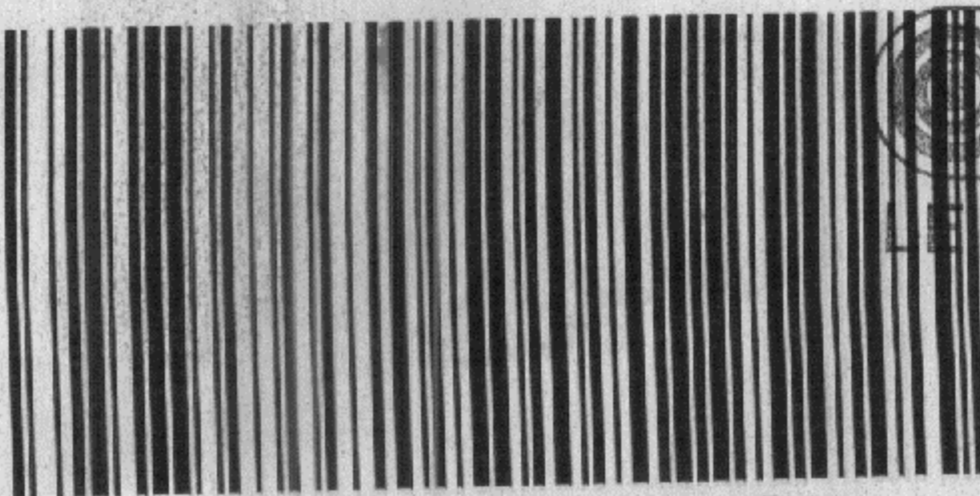


CONTRACT FOR CARRIAGE / DISPATCH NOTE



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



LE CREUSET CANAL WALK  
CO. REG.: 1997/021366/07  
VAT: 4160178069  
TEL: 021 551 0225

SUBBD24991745 EMAIL: canalwalk.store.za@lecreuset.com

Sender's Details		Consignee's Details. Full Street Address Please				Mark Service Required	
Company Name <b>LE CREUSET CRESTA</b>		Company Name <b>LE CREUSET CANAL WALK</b>				<input type="checkbox"/> Same Day	
Street Address <b>BEYERS NAUDE DRIVE SHOP U41 CRESTA SHOPPING CEN CRESTA</b>		Street Address <b>SHOP 176, CANAL WALK SHOPPING CENTRE LOWER GROUND LEVEL CENTURY CITY</b>				<input type="checkbox"/> Express	
Suburb <b>JOHANNESBURG</b>		Suburb				<input type="checkbox"/> With Sunrise Option	
City / Town <b>JNB</b> Postal Code		City / Town <b>CAPE TOWN</b> Postal Code <b>7441</b>				<input type="checkbox"/> With Saturday Service	
Contact		Contact <b>LEANDI</b>				<input type="checkbox"/> Public Holiday Service	
Phone <b>011 476 6010</b>		Phone <b>021 551 0225</b>				<input checked="" type="checkbox"/> Economy	
Destination Country <input checked="" type="checkbox"/> South Africa <input type="checkbox"/> Botswana <input type="checkbox"/> Lesotho <input type="checkbox"/> Namibia <input type="checkbox"/> Swaziland <input type="checkbox"/> Other		(Please Specify)				<input type="checkbox"/> After Hours	
Sender's Reference <b>4717639296</b>		Analysis Code				<input type="checkbox"/> BLNS Customs Tariff	
<b>SPECIAL INSTRUCTIONS</b>							
Bill Charges To Account No. <b>027766</b>		Bill To <input checked="" type="checkbox"/> Sender <input type="checkbox"/> Consignee <input type="checkbox"/> 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 12.4 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			
<b>Total Parcels</b>		<b>NO. OF PARCELS PER DIMENSIONS</b>		<b>LENGTH (CM)</b>		<b>WIDTH (CM)</b>	
1		2		1		1	
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY) <b>CELLEN</b>				Received By DSV Name Of Courier (PLEASE PRINT CLEARLY) <b>CHRIS</b>			
Date Received: <b>02/01/18</b>		Time Received: <b>1059</b>		Date Received: <b>20/12/17</b>		Time Received: <b>1616</b>	
Signature: <i>[Signature]</i>				Signature: <i>[Signature]</i>			
						Total Mass (Kg)	

POD COPY

Version Control (05/2016)