

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



SUBBD24991746

Sender's Details		Consignee's Details. Full Street Address Please	
Company Name	LE CREUSET CRESTA	Company Name	LE CREUSET HEAD OFFICE
Street Address	BEYERS NAUDE DRIVE SHOP U41 CRESTA SHOPPING CEN CRESTA	Street Address	Unit 5 Heron Park Olive Grove Industrial EST Old PARDEVEIJ ROAD
Suburb	JOHANNESBURG	Suburb	Sommeriset West
City/Town	JNB	City/Town	CAPE TOWN
Postal Code		Postal Code	
Contact		Contact	JENNA
Phone	011 476 6010	Phone	021 857 7178
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		
Sender's Reference	UT19639296	Analysis Code	

Mark Service Required
Same Day
Express
With Sunrise Option
With Saturday Service
Public Holiday Service
After Hours
BLNS Customs Tariff
1. ONLINE <input type="checkbox"/>
3. EFT <input type="checkbox"/>

SPECIAL INSTRUCTIONS

Bill Charges To Account No. **027766**

Bill To 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 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).

U. Mokoale 29/12/2017
 SENDER'S AUTHORISED SIGNATURE DATE

Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)
1				

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY)

M. Mokoale

Date Received: *02 01 18*

Time Received: *09:00*

Signature: *HEM*

Received By DSV

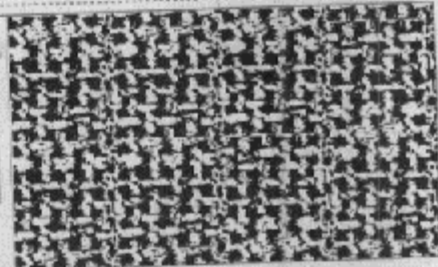
Name Of Courier (PLEASE PRINT CLEARLY)

HEM

Date Received: *29 12 17*

Time Received: *16:16*

Signature: *[Signature]*



POD COPY

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