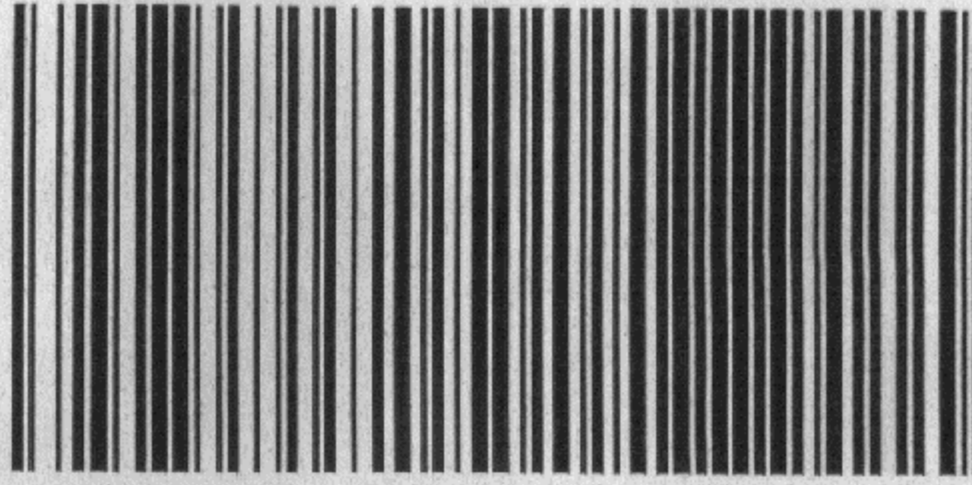


CONTRACT FOR CARRIAGE / DISPATCH NOTE



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



SUBBD24991773

Sender's Details Company Name: LE CREUSET CRESTA Street Address: BEYERS NAUDE DRIVE SHOP U41 CRESTA SHOPPING CEN CRESTA Suburb: JOHANNESBURG City / Town: JNB Postal Code: Contact: Phone: 011 476 6010		Consignee's Details. Full Street Address Please Company Name: LE CREUSET Street Address: UNIT 5 HERON PARK OLIVE GROVE INDUSTRIAL EST OLB PAARBEVLEI Suburb: SOMERSET WEST City / Town: JPE TOWN Postal Code: Contact: LAUREN Phone: 021 251 7178				Mark Service Required <input type="checkbox"/> Same Day <input checked="" type="checkbox"/> Express <input type="checkbox"/> With Sunrise Option <input type="checkbox"/> With Saturday Service <input type="checkbox"/> Public Holiday Service <input type="checkbox"/> Economy <input type="checkbox"/> After Hours BLNS Customs Tariff																										
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)		Sender's Reference: Analysis Code: SPECIAL INSTRUCTIONS Bill Charges To Account No. 027766 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.				1. ONLINE <input type="checkbox"/> 3. EFT <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).		SENDER'S AUTHORIZED SIGNATURE: <i>[Signature]</i> DATE: 02/01/2018				Total Mass (Kg)																										
e-mail / Fax / Proof of Delivery <input type="checkbox"/> e-mail Address / Fax Number		<table border="1"> <thead> <tr> <th>Total Parcels</th> <th>NO. OF PARCELS PER DIMENSIONS</th> <th>LENGTH (CM)</th> <th>WIDTH (CM)</th> <th>HEIGHT (CM)</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>				Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)																					Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY): Nadine Date Received: 02/01/18 Time Received: 0835 Signature: <i>[Signature]</i>	
Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)																												
Received By DSV Name Of Courier (PLEASE PRINT CLEARLY): FURIS Date Received: 02/01/18 Time Received: 1710 Signature: <i>[Signature]</i>																																

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Version Control (06/2016)