

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



SUBBD25003819

Sender's Details		Consignee's Details. Full Street Address Please				Mark Service Required	
Company Name <u>LE CREUSET CRESTA</u>		Company Name <u>LE CREUSET S.A</u>				<input type="checkbox"/> Same Day	
Street Address <u>CRESTA SHOPPING CENTRE</u>		Street Address <u>UNIT 5 HERON PARK</u>				<input type="checkbox"/> Express	
<u>SHOP 441 UPPER LEVEL</u>		<u>OLIVE GROVE BUSINESS PARK</u>				<input type="checkbox"/> With Sunrise Option	
<u>BEYERS NAUDE DRIVE</u>		<u>THE INTERCHANGE</u>				<input type="checkbox"/> With Saturday Service	
Suburb <u>RANDBURG</u>		Suburb <u>SOMERSET WEST</u>				<input type="checkbox"/> Public Holiday Service	
City / Town <input type="text"/> Postal Code <input type="text"/>		City / Town <u>CAPE TOWN</u> Postal Code <input type="text"/>				<input checked="" type="checkbox"/> Economy	
Contact <u>SISA</u>		Contact <u>JENNA</u>				<input type="checkbox"/> After Hours	
Phone <u>011 476 6010</u>		Phone <input type="text"/>				<input type="checkbox"/> BLNS Customs Tariff	
Destination Country <input 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="text"/>		Analysis Code <input type="text"/>				<input type="checkbox"/> 1. ONLINE	
Sender's Reference <u>UT13438066JENNA</u>		<u>DAMAGES</u>				<input type="checkbox"/> 3. EFT	
SPECIAL INSTRUCTIONS							
Bill Charges To Account No. <u>27766</u>		Bill To <input type="checkbox"/> Sender <input type="checkbox"/> Consignee <input type="checkbox"/> Other (Name Please) <input type="text"/>		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 <input type="text"/>					
Total Parcels		NO. OF PARCELS PER DIMENSIONS		LENGTH (CM)		WIDTH (CM)	
<input type="text"/>		<input type="text"/>		<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>		<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>		<input type="text"/>		<input type="text"/>	
Goods received in full without damage (unless endorsed)				Received By DSV			
Name Of Receiver (PLEASE PRINT CLEARLY) <u>BASIL</u>				Name Of Courier (PLEASE PRINT CLEARLY) <u>EPHRAIM</u>			
Date Received: <u>040618</u>		Time Received: <u>0855</u>		Date Received: <u>080718</u>		Time Received: <u>1618</u>	
Signature:				Signature:			

GOOD COPY

Total Mass (Kg)

