

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



SUBBD25003833

POD COPY

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</u>				<input type="checkbox"/> Same Day				
Street Address <u>Shop u14</u>		Street Address <u>Unit 5 Heron Park</u>				<input checked="" type="checkbox"/> Express				
<u>Cresta Shopping Centre Bayers Naude dr</u>		<u>Olive Grove Industrial Estate old Paardeburg Rd</u>				<input type="checkbox"/> With Sunrise Option				
Suburb <u>Randburg</u>		Suburb <u>Somerset West</u>				<input type="checkbox"/> With Saturday Service				
City / Town <u>Johannesburg</u> Postal Code <u> </u>		City / Town <u>CAPE-TOWN</u> Postal Code <u>8001</u>				<input type="checkbox"/> Public Holiday Service				
Contact <u>SISA</u>		Contact <u>VICKY</u>				<input type="checkbox"/> Economy				
Phone <u>011 476 6010</u>		Phone <u>021 851 7178</u>				<input type="checkbox"/> After Hours				
Destination Country <u>South Africa</u>		Other (Please Specify) <u> </u>				<input type="checkbox"/> BLNS Customs Tariff				
Sender's Reference <u>UTI1704336</u>		Analysis Code <u> </u>				<input type="checkbox"/> 1. ONLINE				
SPECIAL INSTRUCTIONS										
Bill Charges To Account No. <u>027766</u>		Bill To <input type="checkbox"/> Sender <input type="checkbox"/> 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 <u> </u>						
Total Parcels		NO. OF PARCELS PER DIMENSIONS		LENGTH (CM)		WIDTH (CM)		HEIGHT (CM)		Total Mass (Kg)
1		1		Flyer k.						
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY) <u>A de Beer</u>					Received By DSV Name Of Courier (PLEASE PRINT CLEARLY) <u>SPH R ATM</u>					QR CODE
Date Received: <u>03/04/18</u>		Time Received: <u>09:26</u>		Date Received: <u>03/04/18</u>		Time Received: <u>14:47</u>				
Signature: <u>A.</u>					Signature: <u>[Signature]</u>					

Version Control (06/2016)