

CONTRACT FOR CARRIAGE / DISPATCH NOTE



DSV South Africa
t/a DSV Distribution
PO Box 63, The Reads 0081
Tel (012) 673-2000
Reg. No. 2004/015747/07
VAT Reg. No. 4260213873



SUBBD25396618

POD COPY

Sender's Details		Consignee's Details. Full Street Address Please				Mark Service Required	
Company Name <u>Le Creuset</u>		Company Name <u>Le Creuset</u>				<input type="checkbox"/> Same Day	
Street Address <u>Shop 318</u>		Street Address <u>Unit 5 Heron Park</u>				<input checked="" type="checkbox"/> Express	
<u>C/O Fehlsen & Keale Rd</u>		<u>Olive Grove Industrial Estate</u>				<input type="checkbox"/> With Sunrise Option	
<u>Brooklyn Mall</u>		<u>Old Bontevelde Rd</u>				<input type="checkbox"/> With Saturday Service	
Suburb <u>Brooklyn</u>		Suburb <u>Somerset West</u>				<input type="checkbox"/> Public Holiday Service	
City/Town <u>Dickson</u> Postal Code <u>0002</u>		City/Town <u>Cape Town</u> Postal Code <u>7200</u>				<input type="checkbox"/> Economy	
Contact <u>Jahma</u>		Contact <u>Jenna</u>				<input type="checkbox"/> After Hours	
Phone <u>012 346 2840</u>		Phone <u>021 851 7178</u>				<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="checkbox"/> 1. ONLINE <input type="checkbox"/>	
Sender's Reference <u>UTI1424623</u>		Analysis Code				<input type="checkbox"/> 3. EFT <input type="checkbox"/>	
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 Consignee Or Other (Third Party) is Billed, Sender Remains Liable For Unpaid Charges.							
* 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					
Total Parcels		NO. OF PARCELS PER DIMENSIONS		LENGTH (CM)		WIDTH (CM)	
<u>1</u>		<u>Flyer</u>					
						HEIGHT (CM)	
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY)				Received By DSV Name Of Courier (PLEASE PRINT CLEARLY)			
<u>C. ARMEW GROVE.</u>				<u>DSV</u>			
Date Received: <u>19 03 18</u>				Date Received: <u>16 03 18</u>			
Time Received: <u>09 24</u>				Time Received: <u>16 10</u>			
Signature: <u>CGROVE</u>				Signature: <u>[Signature]</u>			
						Total Mass (Kg)	

