

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



SUBBD25463699


<b>Sender's Details</b>				<b>Consignee's Details. Full Street Address Please</b>				<b>Mark Service Required</b>																																																													
Company Name <b>LE CREUSET BOUTIQUE STO</b>				Company Name <b>LE CREUSET - TABLE BAY</b>				<input type="checkbox"/> Same Day																																																													
Street Address <b>SHOP 176 CANAL WALK SHOP.CNTR LOWER GROUND LEVEL</b>				Street Address <b>SHOP G 086 CNR OF R27 AND BERKSHIRE BLVD</b>				<input type="checkbox"/> Express																																																													
Suburb <b>CENTURY CITY</b>				Suburb <b>TABLE BAY</b>				<input type="checkbox"/> With Sunrise Option																																																													
City / Town <b>CPT</b>		Postal Code <b>7401</b>		City / Town <b>CAPE TOWN</b>		Postal Code <b>7436</b>		<input type="checkbox"/> With Saturday Service																																																													
Contact <b>LIZE MARIE</b>				Contact <b>ALHADIA</b>				<input type="checkbox"/> Public Holiday Service																																																													
Phone <b>021 551 0225</b>				Phone <b>021 300 3148</b>				<input checked="" type="checkbox"/> Economy																																																													
Destination Country		South Africa <input checked="" type="checkbox"/>		Botswana		Lesotho		Namibia																																																													
								Swaziland																																																													
								Other (Please Specify)																																																													
Sender's Reference <b>WTI 9713110</b>				Analysis Code																																																																	
<b>SPECIAL INSTRUCTIONS</b>																																																																					
Bill Charges To Account No. <b>027766</b>		Bill To <input type="checkbox"/> Sender		<input checked="" type="checkbox"/> Consignee		Other (Name Please) <input type="checkbox"/>																																																															
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																																																															
<b>Total Parcels</b>		<b>NO. OF PARCELS PER DIMENSIONS</b>		<b>LENGTH (CM)</b>		<b>WIDTH (CM)</b>		<b>HEIGHT (CM)</b>																																																													
1																																																																					
<table border="0"> <tr> <td colspan="5">Goods received in full without damage (unless endorsed)</td> <td colspan="5">Received By DSV</td> </tr> <tr> <td colspan="5">Name Of Receiver (PLEASE PRINT CLEARLY)</td> <td colspan="5">Name Of Courier (PLEASE PRINT CLEARLY)</td> </tr> <tr> <td colspan="5">MINETTE</td> <td colspan="5">GERARD</td> </tr> <tr> <td colspan="2">Date Received:</td> <td colspan="3">Time Received:</td> <td colspan="2">Date Received:</td> <td colspan="3">Time Received:</td> </tr> <tr> <td colspan="2">09/09/18</td> <td colspan="3">10:26</td> <td colspan="2">08/09/18</td> <td colspan="3">12:50</td> </tr> <tr> <td colspan="5">Signature: </td> <td colspan="5">Signature: </td> </tr> </table>										Goods received in full without damage (unless endorsed)					Received By DSV					Name Of Receiver (PLEASE PRINT CLEARLY)					Name Of Courier (PLEASE PRINT CLEARLY)					MINETTE					GERARD					Date Received:		Time Received:			Date Received:		Time Received:			09/09/18		10:26			08/09/18		12:50			Signature:					Signature:				
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Total Mass (Kg)																																																																					

Version Control (06/2016)