

CONTRACT FOR CARRIAGE / DISPATCH NOTE



DSV South Africa
 Va DSV Distribution
 PO Box 83, The Roode 0061
 Tel (012) 673-2000
 Reg. No. 2004/015747/07
 VAT Reg. No. 4260213873



SUBBD25463711

Sender's Details		Consignee's Details. Full Street Address Please	
Company Name LE CREUSET BOUTIQUE STO	Company Name le creuset Boutique store	Street Address Shop 45	Street Address Somerset Mall
Street Address SHOP 20B	Street Address Somerset Mall	Suburb Somerset West	Suburb Somerset West
Street Address GARDENS CENTRE	Street Address Somerset Mall	Postal Code 7130	Postal Code 7130
Suburb GARDENS	Suburb GARDENS	City/Town CPT	City/Town CPT
City/Town LAURENCIA FITCHE	City/Town LAURENCIA FITCHE	Contact 021 462 7277	Contact 021 851 0661
Phone 021 462 7277	Phone 021 462 7277	Phone 021 851 0661	Phone 021 851 0661

Mark Service Required
Same Day
Express
With Sunrise Option
With Saturday Service
Public Holiday Service
<input checked="" type="checkbox"/> Economy
After Hours
BLNS Customs Tariff
1. ONLINE <input type="checkbox"/>
3. EFT <input type="checkbox"/>

Destination Country	South Africa <input checked="" type="checkbox"/>	Botswana	Lesotho	Namibia	Swaziland	Other
Sender's Reference	4T10484521					

SPECIAL INSTRUCTIONS

Bill Charges To Account No: **027766**

Bill To: Sender Consignee Other (Name Please)

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 e-mail Address / Fax Number

Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)
1				

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY)
ROSHAN

Date Received:
120218

Time Received:
1333

Signature: *[Signature]*

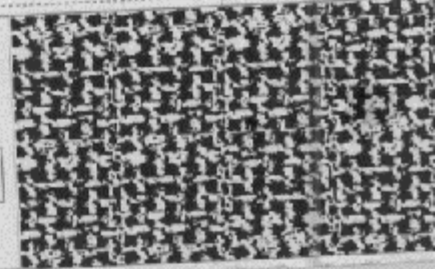
Received By DSV

Name Of Courier (PLEASE PRINT CLEARLY)
TOO

Date Received:
090218

Time Received:
1430

Signature: *[Signature]*



POD COPY

Refer: Contract (06/2015)