

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



SUBBD25505509

SUBHT 04825300

SUBHT 04825302

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 12 Menlyn Maine, January Masilela & Amaranth Drive</u>		Street Address <u>Unit 5 Heron Park, Old Paardelei, Olive Grove Industrial Estate</u>						<input checked="" type="checkbox"/> Express	
Suburb <u>Waterkloof ex2</u>		Suburb <u>Waterkloof ex2 Somerset W</u>						<input type="checkbox"/> With Sunrise Option	
City/Town <u>Pretoria</u> Postal Code <u>0108</u>		City/Town <u>Cape Town</u> Postal Code <u>8001</u>						<input type="checkbox"/> With Saturday Service	
Contact <u>Joni</u>		Contact <u>Vicky</u>						<input type="checkbox"/> Public Holiday Service	
Phone <u>012 004 0052</u>		Phone <u>021 851 7178</u>						<input type="checkbox"/> Economy	
Destination Country		South Africa		Botswana		Lesotho		Namibia	
								Swaziland	
								Other (Please Specify)	
Sender's Reference <u>4T19644030</u>		Analysis Code						BLNS Customs Tariff	
SPECIAL INSTRUCTIONS									
Bill Charges To Account No. <u>027766</u>		Bill To Sender <input type="checkbox"/>		Consignee <input type="checkbox"/>		Other (Name Please) <input type="checkbox"/>		1. ONLINE <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			
Total Parcels		NO. OF PARCELS PER DIMENSIONS		LENGTH (CM)		WIDTH (CM)		HEIGHT (CM)	
<u>3</u>									
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY) <u>J B ENADE</u>					Received By DSV Name Of Courier (PLEASE PRINT CLEARLY) <u>TUIS</u>				
Date Received: <u>04 01 18</u>					Date Received: <u>02 07 18</u>				
Time Received: <u>08 45</u>					Time Received: <u>14 45</u>				
Signature: <u>[Signature]</u>					Signature: <u>[Signature]</u>				
Total Mass (Kg)									

POD COPY

Version Control (06/2016)

