

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



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POD COPY

| Sender's Details |                                      | Consignee's Details. Full Street Address Please |   |
|------------------|--------------------------------------|---|---|
| Company Name     | LE CREUSET BOUTIQUE STORE            | Company Name                                    | Le Creuset Boutique   |
| Street Address   | SHOP 45<br>SOMERSET MALL<br>N2 & R44 | Street Address                                  | Shop 3 La Lucia Mall<br>90 William Campbell drive<br>La Lucia, Durban |
| Suburb           | SOMERSET WEST                        | Suburb  |   |
| City / Town      | CPT                                  | City / Town                                     | Durban  |
| Postal Code      | 7130                                 | Postal Code                                     | 4051  |
| Contact          | ELIZE DU PLESSIS                     | Contact   | OSI 572 5045<br>ATISHA  |
| Phone            | 021 851 0661                         | Phone   |   |

Mark Service Required

Same Day

Express

With Sunrise Option

With Saturday Service

Public Holiday Service

Economy

After Hours

BLNS Customs Tariff

Destination Country: South Africa, Botswana, Lesotho, Namibia, Swaziland, Other (Please Specify)

Sender's Reference: U171310870

Analysis Code: [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

**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).

SENDER'S AUTHORISED SIGNATURE: *[Signature]* DATE: 15/03/2018

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

1. ONLINE

3. EFT

Total Mass (Kg)

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY): Elizaboth

Date Received: 19 03 18

Time Received: 13 45

Signature: *[Signature]*

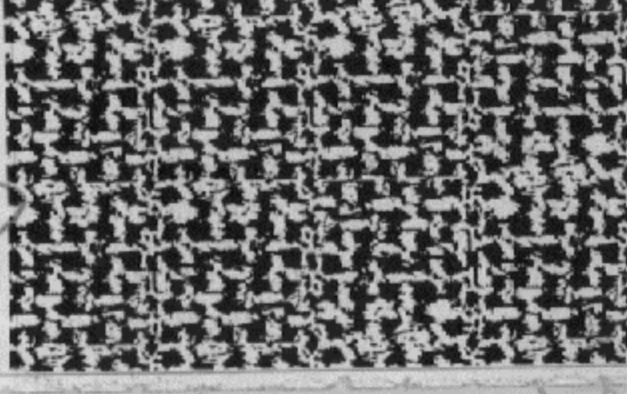
Received By DSV

Name Of Courier (PLEASE PRINT CLEARLY): [Signature]

Date Received: 16 03 18

Time Received: 10 00

Signature: *[Signature]*



Version Control (05/2016)