

CONTRACT FOR CARRIAGE / DISPATCH NOTE



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



SUBBD25508960

Sender's Details		Consignee's Details. Full Street Address Please				Mark Service Required
Company Name: LE CREUSET BOUTIQUE STORE		Company Name: LE CREUSET HEADOFFICE				<input type="checkbox"/> Same Day
Street Address: 168, CAVENDISH 3 VINEYARD ROAD		Street Address: UNIT 5, OLIVE GROVE Industrial Estate, Old Paardevlei Road				<input type="checkbox"/> Express
Suburb: CLAREMONT 5		Suburb: Somerset West				<input type="checkbox"/> With Sunrise Option
City/Town: CPT		City/Town: Cape Town		Postal Code: 7800		<input type="checkbox"/> With Saturday Service
Contact: ZAHIRA HOUSEN		Contact: Mary 18 Valonda				<input type="checkbox"/> Public Holiday Service
Phone: 021 671 9550		Phone: 021 551 7178				<input checked="" type="checkbox"/> Economy

Destination Country	South Africa	Botswana	Lesotho	Namibia	Swaziland	Other (Please Specify)
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Sender's Reference: U X I 0 2 4 7 7 6 0 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 AUTHORIZED SIGNATURE: *[Signature]* DATE: 30/01/2018

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	1x Box			

Goods received in full without damage (unless endorsed)		Received By DSV	
Name Of Receiver (PLEASE PRINT CLEARLY): EIVINO		Name Of Courier (PLEASE PRINT CLEARLY): [Signature]	
Date Received: 31/01/18	Time Received: 09:20	Date Received: 30/01/18	Time Received: 15:25
Signature: <i>[Signature]</i>		Signature: <i>[Signature]</i>	



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