

CONTRACT FOR CARRIAGE / DISPATCH NOTE



DSV South Africa
 Via DSV Distribution
 PO Box 63, The Reeds 0061
 Tel (012) 673-2000
 Reg. No. 2004/015747/07
 VAT Reg. No. 4260213673



SUBBD25569356

POD COPY

Sender's Details		Consignee's Details. Full Street Address Please						Mark Service Required													
Company Name	LE CREUSET	Company Name	LE CREUSET						<input type="checkbox"/> Same Day												
Street Address	CAVENDISH SQUARE MAIL SHOP L81	Street Address	SHOP 573, UPPER LEVEL TYGEBERVALEU CENTRE BUL BEZUIDENHOUT RD, BELLVILLE						<input type="checkbox"/> Express												
Suburb	CLAREMONT	Suburb	BELLVILLE						<input type="checkbox"/> With Sunrise Option												
City / Town		City / Town	BELLVILLE						<input type="checkbox"/> With Saturday Service												
Postal Code		Postal Code	7530						<input type="checkbox"/> Public Holiday Service												
Contact	Zaahira/Miesha	Contact							<input checked="" type="checkbox"/> Economy												
Phone	021 671 9550	Phone	(021) 414-7053						<input type="checkbox"/> After Hours												
Destination Country	South Africa	Botswana	Lesotho	Namibia	Swaziland	Other (Please Specify)		BLNS Customs Tariff													
Sender's Reference	UT10402138						Analysis Code		1. ONLINE <input type="checkbox"/>												
SPECIAL INSTRUCTIONS																					
Bill Charges To Account No.			Bill To	Consignee		Other (Name Please)		3. EFT <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															
<table border="1"> <thead> <tr> <th>Total Parcels</th> <th>NO. OF PARCELS PER DIMENSIONS</th> <th>LENGTH (CM)</th> <th>WIDTH (CM)</th> <th>HEIGHT (CM)</th> <th>Total Mass (Kg)</th> </tr> </thead> <tbody> <tr> <td>1</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>										Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)	Total Mass (Kg)	1					
Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)	Total Mass (Kg)																
1																					
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY)					Received By DSV Name Of Courier (PLEASE PRINT CLEARLY)																
YOLANDA					[Signature]																
Date Received:		Time Received:		Date Received:		Time Received:		[Barcode]													
07/02/18		1357		06/02/18		1535															
Signature: [Signature]					Signature: [Signature]																

Version Control (06/2015)