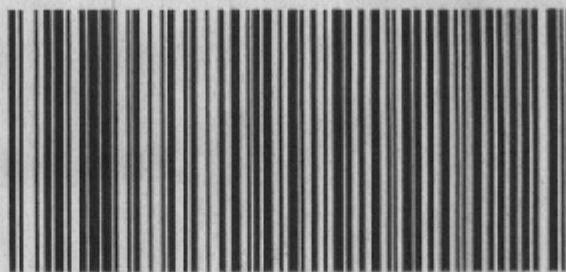


CONTRACT FOR CARRIAGE / DISPATCH NOTE



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. 4280213873



SUBBD25802021

Sender's Details		Consignee's Details. Full Street Address Please	
Company Name	NEIL PARKIN	Company Name	LE CREUSET
Street Address	R WILLOW RD NEWLANDS	Street Address	UNIT 5 HERON PARK OLIVE GRAVE INDUSTRIAL SOMERSET WEST
Suburb	NEWLANDS	Suburb	
City/Town	C 7	City/Town	
Postal Code	7700	Postal Code	7130
Contact	083 926 6732	Contact	MARY
Phone		Phone	021 8517178

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

Destination Country	South Africa	Botswana	Lesotho	Namibia	Swaziland	Other (Please Specify)
Sender's Reference						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 _____ DATE 31/12/2018

e-mail / Fax / Proof of Delivery e-mail Address / Fax Number _____

Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)
<u>1</u>				

Goods received in full without damage (unless endorsed)
Name Of Receiver (PLEASE PRINT CLEARLY)
DASIL

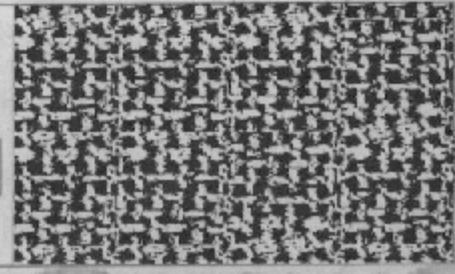
Date Received: 020119 Time Received: 0813

Signature: _____

Received By DSV
Name Of Courier (PLEASE PRINT CLEARLY)
HOWARTH

Date Received: 311218 Time Received: 1310

Signature: _____



POD COPY