

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



SUBBD26095972

Sender's Details		Consignee's Details. Full Street Address Please				Mark Service Required	
Company Name LE CREUSET		Company Name LE CREUSET SA				<input type="checkbox"/> Same Day	
Street Address SHOP 105 GARDEN ROUTE MALL N2 HIGHWAY & KNYSNA RD		Street Address UNIT 1, HERON PARK OLIVE GROVE INDUSTRIAL STATE OLD PARADET ROAD				<input checked="" type="checkbox"/> Express	
Suburb GEORGE		Suburb SOMERSET WEST				<input type="checkbox"/> With Sunrise Option	
City / Town GEORGE (GR) Postal Code 6546		City / Town CPT		Postal Code 801		<input type="checkbox"/> With Saturday Service	
Contact ELZANNE		Contact VICKIE (ACCOUNTS)				<input type="checkbox"/> Public Holiday Service	
Phone 044 004 0112		Phone 021 851 7178				<input type="checkbox"/> Economy	
Destination Country		Lesotho		Namibia		<input type="checkbox"/> After Hours	
South Africa		Swaziland		Other (Please Specify)		<input type="checkbox"/> BLNS Customs Tariff	
Botswana		Analysis Code				<input type="checkbox"/> 1. ONLINE	
Sender's Reference						<input type="checkbox"/> 3. EFT	
SPECIAL INSTRUCTIONS							
Bill Charges To Account No. 027766		Bill To <input type="checkbox"/> Sender		Consignee <input type="checkbox"/>		Other (Name Please) <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		SENDER'S AUTHORISED SIGNATURE <i>Alott</i>		DATE 19-02-18	
Total Parcels		NO. OF PARCELS PER DIMENSIONS		LENGTH (CM)		WIDTH (CM)	
<input type="checkbox"/>		1		FLYER BAG			
HEIGHT (CM)						Total Mass (Kg)	
Goods received in full without damage (unless endorsed)				Received By DSV			
Name Of Receiver (PLEASE PRINT CLEARLY)				Name Of Courier (PLEASE PRINT CLEARLY)			
J BENA DE				Alott			
Date Received:		Time Received:		Date Received:		Time Received:	
200218		0858		190218		1600	
Signature: <i>J Bena De</i>				Signature: <i>Alott</i>			

POD COPY

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