

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

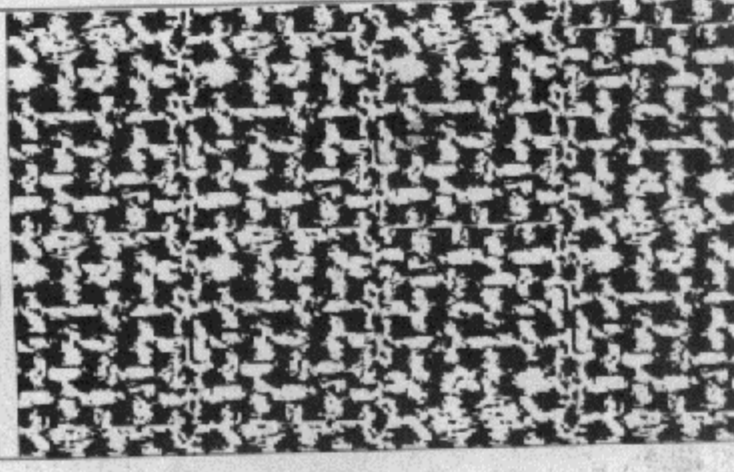


SUBBD26308771

35
60
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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 MALL OF AFRICA SHOP 204 ALLENDALE & BEN SCHOEMAN		Street Address UNIT 5 HERON PARK OLIVE GROVE INDUSTRIAL ESTATE						<input checked="" type="checkbox"/> Express	
Suburb JOHANNESBURG		Suburb OLD PARDEYLEI ROADS						<input type="checkbox"/> With Sunrise Option	
City / Town JNB	Postal Code 7620	City / Town CAPE TOWN				Postal Code		<input type="checkbox"/> With Saturday Service	
Contact PHINDILE KHANGALE		Contact YICKY						<input type="checkbox"/> Public Holiday Service	
Phone 011 568 2097		Phone 021 851 7178						<input type="checkbox"/> Economy	
Destination Country		South Africa <input checked="" type="checkbox"/>		Botswana		Lesotho		Namibia	
Other		Swaziland		Other		(Please Specify)		<input type="checkbox"/> After Hours	
Sender's Reference UT21993949		Analysis Code						BLNS Customs Tariff	
SPECIAL INSTRUCTIONS									
Bill Charges To Account No. 027766		Bill To <input checked="" type="checkbox"/> Sender		Consignee <input type="checkbox"/>		Other (Name Please) <input type="checkbox"/>		1. ONLINE <input type="checkbox"/>	
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).									
e-mail / Fax / Proof of Delivery <input type="checkbox"/>		e-mail Address / Fax Number							
Total Parcels		NO. OF PARCELS PER DIMENSIONS		LENGTH (CM)		WIDTH (CM)		HEIGHT (CM)	
01									
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY) J B ENADE						Received By DSV Name Of Courier (PLEASE PRINT CLEARLY) Mpho			
Date Received: 180418		Time Received: 0925		Date Received: 160418		Time Received: 1310		Signature:	
Signature:									

POD COPY



3. EFT

Total Mass (Kg)

Version Control (06/2016)