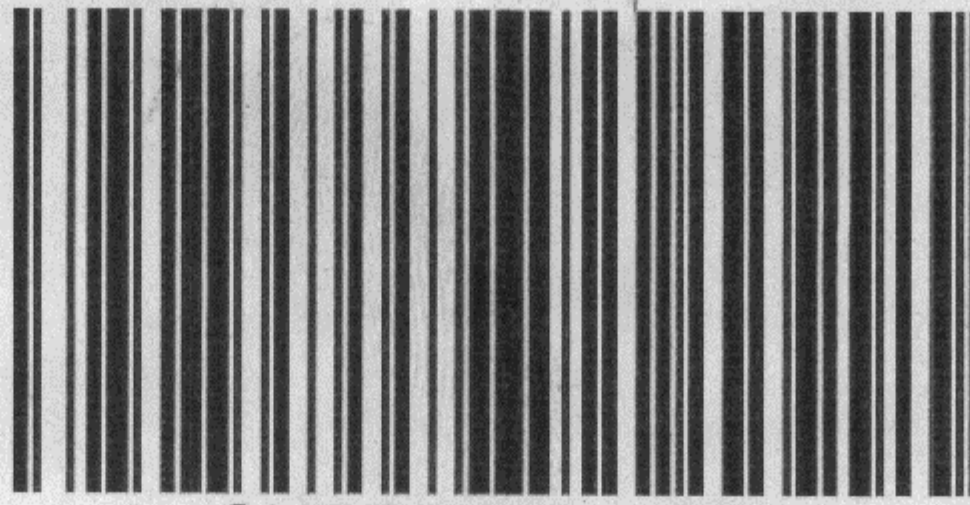


**CONTRACT FOR CARRIAGE / DISPATCH NOTE**



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



SUBBD26324350


Sender's Details		Consignee's Details. Full Street Address Please						Mark Service Required	
Company Name <u>Le Creuset</u>		Company Name <u>Le Creuset</u>						<input type="checkbox"/> Same Day	
Street Address <u>Shop L21</u>		Street Address <u>Unit 5 Heion Park</u>						<input type="checkbox"/> Express	
<u>William Nicolway drive</u>		<u>Old Paradavlei road</u>						<input type="checkbox"/> With Sunrise Option	
<u>Nicolway Shopping Center</u>		<u>Ind. estate</u>						<input type="checkbox"/> With Saturday Service	
Suburb <u>Bryanston</u>		Suburb <u>Somerset West</u>						<input type="checkbox"/> Public Holiday Service	
City / Town <u>JHB</u> Postal Code .....		City / Town <u>Cape Town</u> Postal Code .....						<input checked="" type="checkbox"/> Economy	
Contact <u>ZANELE</u>		Contact <u>Franci</u>						<input type="checkbox"/> After Hours	
Phone <u>011 706 2198</u>		Phone <u>021 851 7178</u>						BLNS Customs Tariff	
Destination Country		South Africa	Botswana	Lesotho	Namibia	Swaziland	Other (Please Specify)		
Sender's Reference		Analysis Code							
<b>SPECIAL INSTRUCTIONS</b>									
Bill Charges To Account No.		Bill To Sender <input type="checkbox"/>		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							
<b>Total Parcels</b>		<b>NO. OF PARCELS PER DIMENSIONS</b>		<b>LENGTH (CM)</b>		<b>WIDTH (CM)</b>		<b>HEIGHT (CM)</b>	
1									
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY) <u>ECUINO</u>					Received By DSV Name Of Courier (PLEASE PRINT CLEARLY) <u>[Signature]</u>				
Date Received: <u>07/05/18</u>		Time Received: <u>09:40</u>			Date Received: <u>07/05/18</u>		Time Received: <u>14:00</u>		
Signature: <u>[Signature]</u>					Signature: <u>[Signature]</u>				
Total Mass (Kg)									

POD COPY

Version Control (06/2016)