

CONTRACT FOR CARRIAGE / DISPATCH NOTE



DSV Road (Pty) Ltd
 t/a DSV Distribution
 PO Box 63, The Reeds 0061
 Tel (012) 673-2000
 Reg. No. 2000/016342/07
 VAT No. 4980189685



SUBBD26714487

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Sender's Details		Consignee's Details. Full Street Address Please					Mark Service Required		
Company Name ATM SOLUTIONS 7 DELPH STREET		Company Name ATM SOLUTIONS DSV DEPOT					<input type="checkbox"/> Same Day		
Street Address		Street Address					<input type="checkbox"/> Express		
Suburb SANDTON		Suburb PORT SHEPSTONE					<input type="checkbox"/> With Sunrise Option		
City / Town JNB Postal Code		City / Town PORT SHEPSTONE (PSP)					<input type="checkbox"/> With Saturday Service		
Contact		Contact KISHAL HART					<input type="checkbox"/> Public Holiday Service		
Phone		Phone 083 603 4944					<input checked="" type="checkbox"/> Economy		
Destination Country		Destination Country					<input type="checkbox"/> After Hours		
South Africa <input checked="" type="checkbox"/>		Botswana <input type="checkbox"/> Lesotho <input type="checkbox"/> Namibia <input type="checkbox"/> Swaziland <input type="checkbox"/> Other (Please Specify)					BLNS Customs Tariff		
Sender's Reference		Analysis Code					1. ONLINE <input type="checkbox"/>		
SPECIAL INSTRUCTIONS									
Bill Charges To Account No. 027766		Bill To <input checked="" type="checkbox"/> Sender <input type="checkbox"/> Consignee <input type="checkbox"/> Other (Name Please) <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 14.14 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 14.5 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 14.5, 14.6 AND 14.7 OVERLEAF).									
e-mail / Fax / Proof of Delivery <input type="checkbox"/>					e-mail Address / Fax Number			3. EFT <input type="checkbox"/>	
Total Parcels		NO. OF PARCELS PER DIMENSIONS		LENGTH (CM)		WIDTH (CM)		HEIGHT (CM)	
1				59		35		24	
								Total Mass (Kg)	
								14	
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY) KISHAL				Received By DSV Name Of Courier (PLEASE PRINT CLEARLY) [Signature]					
Date Received: 16/01/18		Time Received: 14:50		Date Received: 15/01/18		Time Received: 15:00			
Signature: [Signature]				Signature: [Signature]					

POD COPY

Version Control (01/01/17)