

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. 4880189685



SUBBD26769008

2 2 2 E E E 2 2 2

Sender's Details

Consignee's Details. Full Street Address Please

Company Name Le Creuset
Street Address 90 William Cambell drive, sho
La Lucia
Umhlanga
Suburb
City / Town DUR Postal Code 4000
Contact Bill McIntosh/Marion
Phone 0315725045

Company Name LE CREUSET OPT
Street Address UNIT 01, HERON PARK
OLIVE GROVE IND ESTATE
OLD PARDUELEI ROAD
Suburb SOMERSET WEST
City / Town CAPE TOWN Postal Code 8000
Contact JEMA
Phone 021 8517170

Mark Service Required

Same Day

Express

With Sunrise Option

With Saturday Service

Public Holiday Service

~~Economy~~

After Hours

BLNS
Customs
Tariff

Destination Country South Africa Botswana Lesotho Namibia Swaziland Other (Please Specify)

Sender's Reference UT15082391 Analysis Code

SPECIAL INSTRUCTIONS CUSTOMER DAMAGES

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 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).

[Signature]
SENDER'S AUTHORISED SIGNATURE

15/10/2018
DATE

1. ONLINE

3. EFT

Total Mass (Kg)

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

Total Parcels NO. OF PARCELS PER DIMENSIONS LENGTH (CM) WIDTH (CM) HEIGHT (CM)

1

BOX

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

BASIL

Date Received: 17/10/18 Time Received: 0950

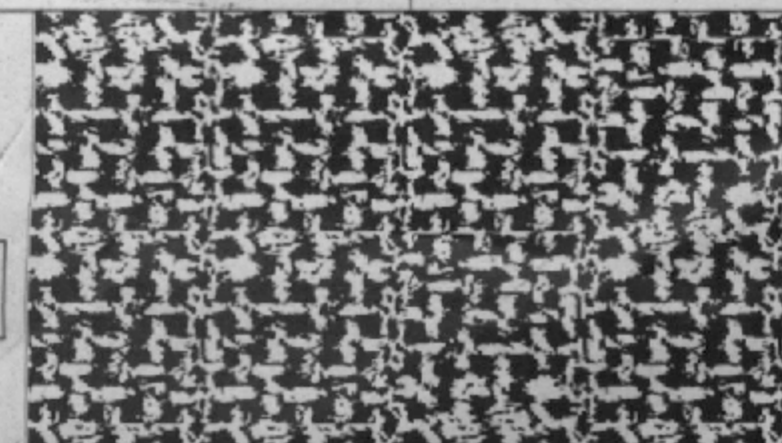
Signature: [Signature]

Received By DSV
Name Of Courier (PLEASE PRINT CLEARLY)

[Blank]

Date Received: [Blank] Time Received: [Blank]

Signature: [Blank]



POD COPY

Version Control (06/2017)