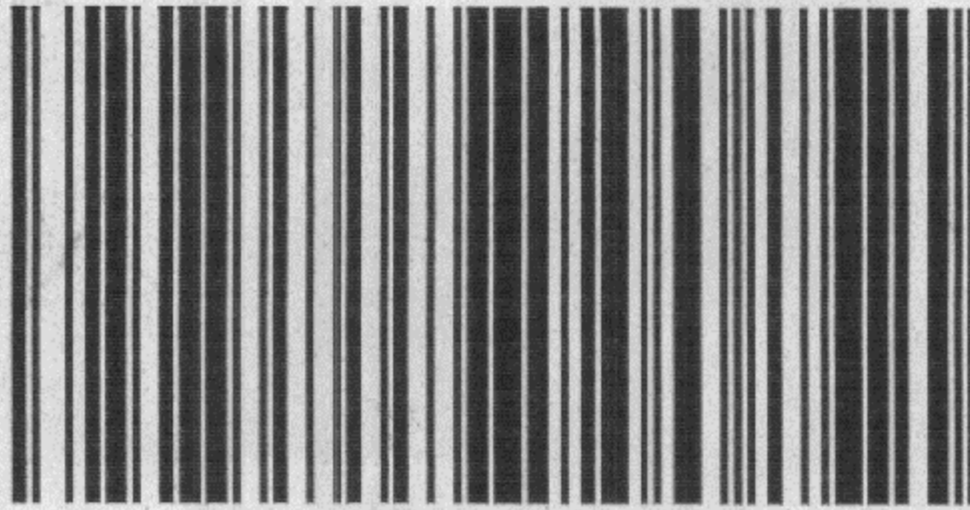


CONTRACT FOR CARRIAGE / DISPATCH NOTE



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



SUBBD26876207

2 2 2 E E E 2 2 2

SUBHT11661689

Sender's Details		Consignee's Details. Full Street Address Please						Mark Service Required	
Company Name LE CREUSET HOBART GROVE		Company Name LE CREUSET						<input type="checkbox"/> Same Day	
Street Address SHOP G1		Street Address UNIT 5 HERON PARK						<input type="checkbox"/> Express	
CNR HOBART & GROSVENOR ROADS		OLIVE GROVE INDUSTRIAL ESTATE						<input type="checkbox"/> With Sunrise Option	
Suburb BRYANSTON		Suburb OLD PAARDEVLEI ROAD						<input type="checkbox"/> With Saturday Service	
City / Town JNB Postal Code 2021		City / Town CAPE TOWN Postal Code 7129						<input checked="" type="checkbox"/> Economy	
Contact SCUARIAN		Contact LAUREN						<input type="checkbox"/> After Hours	
Phone 011 568 4708		Phone 021 851 7178						<input type="checkbox"/> BLNS Customs Tariff	
Destination Country		South Africa		Botswana		Lesotho		Namibia	
		<input checked="" type="checkbox"/>							
Sender's Reference UT10574462		Analysis Code						<input type="checkbox"/> 1. ONLINE	
SPECIAL INSTRUCTIONS								<input type="checkbox"/> 3. EFT	
Bill Charges To Account No. 027766		Bill To <input checked="" type="checkbox"/> Sender		Consignee <input type="checkbox"/>		Other (Name Please) <input type="checkbox"/>		Total Mass (Kg)	
		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									
Total Parcels		NO. OF PARCELS PER DIMENSIONS		LENGTH (CM)		WIDTH (CM)		HEIGHT (CM)	
1									
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY) ELVINO					Received By DSV Name Of Courier (PLEASE PRINT CLEARLY) [Signature]				
Date Received: 15 02 18					Date Received: 15 02 18				
Time Received: 0945					Time Received: 1520				
Signature: [Signature]					Signature: [Signature]				

POD COPY

Version Control (08/2017)

