

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



SUBBD27087862

2 2 2 E E E 2 2 2

Sender's Details		Consignee's Details. Full Street Address Please	
Company Name	LE CREUSET TABLE BAY	Company Name	Bernadette Gouws
Street Address	SHOP G086 TABLE BAY MALL CNR R27 & BERKSHIRE BLVD	Street Address	16 Neptunus Street Vredenburg
Suburb	BLOBERG	Suburb	Vredenburg
City / Town	CAPE TOWN Postal Code 7436	City / Town	Cape Town Postal Code 7380
Contact	ALHADIA	Contact	Bernadette
Phone		Phone	083 525 1974
Destination Country	<input checked="" type="checkbox"/> South Africa	<input type="checkbox"/> Lesotho	<input type="checkbox"/> Namibia
	<input type="checkbox"/> Botswana	<input type="checkbox"/> Swaziland	<input type="checkbox"/> Other (Please Specify)

Mark Service Required

Same Day

Express

With Sunrise Option

With Saturday Service

Public Holiday Service

Economy

After Hours

BLNS Customs Tariff

Sender's Reference: UTI0624240 Analysis Code: [] [] [] [] [] [] [] [] [] []

SPECIAL INSTRUCTIONS

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).

Par
 SENDER'S AUTHORISED SIGNATURE DATE 15/02/18

1. ONLINE

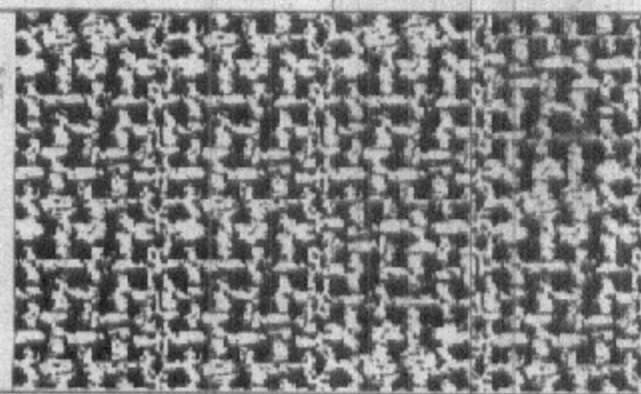
3. EFT

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				

Total Mass (Kg)

Goods received in full without damage (unless endorsed)		Received By DSV	
Name Of Receiver (PLEASE PRINT CLEARLY)		Name Of Courier (PLEASE PRINT CLEARLY)	
GOUWS		WAS	
Date Received:	Time Received:	Date Received:	Time Received:
16/02/18	1044	15/02/18	0045
Signature:		Signature:	



POD COPY

Version Control (05/2017)