

CONTRACT FOR CARRIAGE / DISPATCH NOTE

2 2 2 E E E 2 2 2



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



SUBBD27105638

POD COPY

Sender's Details		Consignee's Details. Full Street Address Please	
Company Name: <u>LE CREUSET</u>	Company Name: <u>LE CREUSET HEAD OFFICE</u>	Street Address: <u>SHOP 202A</u>	Street Address: <u>UNIT 5 NERON PARK</u>
Street Address: <u>ROSEBANK MALL</u>	Street Address: <u>OLIVE GROVE INDUSTRIAL EST</u>	Suburb: <u>CAPE BATH & CRADOCK</u>	Suburb: <u>OLD PAARDEVELEI ROAD</u>
Suburb: <u>ROSEBANK</u>	Suburb: <u>SOMERSET WEST</u>	City/Town: <u>JOHANNESBURG</u>	City/Town: <u>CAPE TOWN</u>
Postal Code: <u>2096</u>	Postal Code: <u>7178</u>	Contact: <u>ROSE</u>	Contact: <u>JENNA</u>
Phone: <u>011 568-4745</u>	Phone: <u>021 351 7178</u>	Destination Country: South Africa <input checked="" type="checkbox"/> Botswana <input type="checkbox"/> Lesotho <input type="checkbox"/> Namibia <input type="checkbox"/> Swaziland <input type="checkbox"/> Other <input type="checkbox"/> (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: 414119638628

Analysis Code:

SPECIAL INSTRUCTIONS

Bill Charges To Account No: 087766

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).

Mobley 29/12/17
SENDER'S AUTHORISED SIGNATURE 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)
<input type="checkbox"/>				

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY): Moss

Date Received: 080118

Time Received: 09:00

Signature: [Signature]

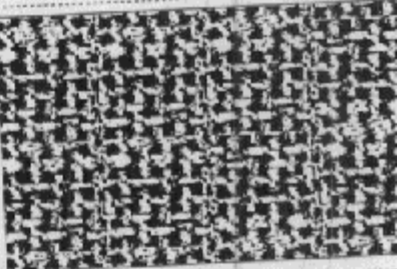
Received By DSV

Name Of Courier (PLEASE PRINT CLEARLY): KABL

Date Received: 291217

Time Received: 1430

Signature: [Signature]



Version Control (08/2017)