

**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



SUBBD27150801

2 2 2 E E E 2 2 2


**Sender's Details**

**Consignee's Details. Full Street Address Please**

Mark Service Required

Company Name Le. Creuset  
Street Address Tabe Bay Mall, Shop G086, Cnr R27 and Bopkshipe Blvd.  
Suburb Blouberg, Cape Town.  
City / Town Blouberg Postal Code 7436  
Contact Ahadija  
Phone 021 3003148

Company Name Le Creuset  
Street Address Unit 1 Heron Park Olive Grove Industrial Estate Old Paardenlei Road.  
Suburb Somerset West  
City / Town Somerset West Postal Code 7130  
Contact Helena  
Phone 021 851 7178

- Same Day
- Express
- With Sunrise Option
- With Saturday Service
- Public Holiday Service

Economy

After Hours

BLNS Customs Tariff

- 1. ONLINE
- 3. EFT

Total Mass (Kg)

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

Sender's Reference UT12292089 Analysis Code

**SPECIAL INSTRUCTIONS**

Bill Charges To Account No.  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

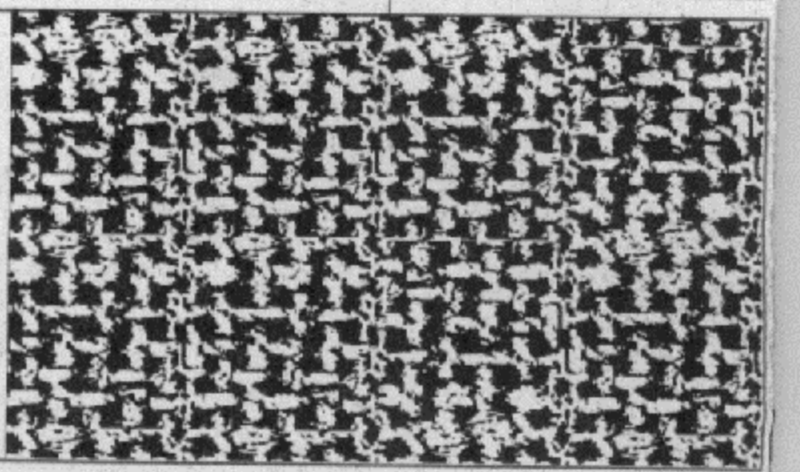
03 May 2018  
DATE

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

Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)
<u>1 box</u>				

Goods received in full without damage (unless endorsed)  
Name Of Receiver (PLEASE PRINT CLEARLY) SI 21 NO  
Date Received: 070518 Time Received: 0940  
Signature: *[Signature]*

Received By DSV  
Name Of Courier (PLEASE PRINT CLEARLY) MAT  
Date Received: 040518 Time Received: 1335  
Signature: *[Signature]*



POD COPY

Version Control (08/2017)