

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. 2003/016342/07
VAT No. 4880189685



SUBBD27363250

2 2 2 E E E 2 2 2

Sender's Details	Consignee's Details. Full Street Address Please
Company Name: LE CREUSET HOBART GROVE	Company Name: LE CREUSET ROSEBANK
Street Address: SHOP G1 CNR HOBART & GROSVENOR ROADS	Street Address: SHOP 202A ROSEBANK-MALL 50 BATH AVENUE
Suburb: BRYANSTON	Suburb: ROSEBANK
City/Town: JNB Postal Code: 2021	City/Town: JOHANNESBURG Postal Code: 2196
Contact: SEVARIAN	Contact: ELLEN
Phone: 011 568 4708	Phone: 011 568 4745

Mark Service Required

Same Day

Express

With Sunrise Option

With Saturday Service

Public Holiday Service

Economy

After Hours

SEVARIAN
CUSTOMS
TARIFF

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

Senders Reference: **UAT 100 SS 471** 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.

1. ONLINE

3. EFT

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 14.6 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).

Sender's Authorized Signature: *[Signature]* DATE: **22/01/2018**

Total Mass (Kg)

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): **Testlynn**

Date Received: **23 01 18** Time Received: **19:40 29**

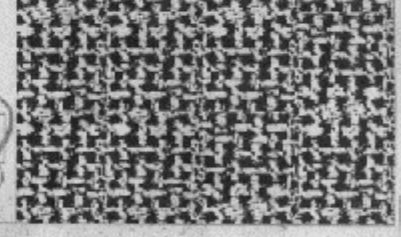
Signature: *[Signature]*

Received By DSV

Name Of Courier (PLEASE PRINT CLEARLY): **[Signature]**

Date Received: **23 01 18** Time Received: **15:00**

Signature: *[Signature]*



POD COPY

Version Control (08/2017)