

CONTRACT FOR CARRIAGE / DISPATCH NOTE

UTI-3828119



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



SUBBD27409644

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SUBH T 10173737


POD COPY

Sender's Details		Consignee's Details. Full Street Address Please			
Company Name <b>LE CREUSET</b>		Company Name <b>LE CREUSET</b>			
Street Address <b>SHOP LM 30A CLEARWATER MALL CHRISTIAN DE WET ROAD JOHANNESBURG</b>		Street Address <b>UNIT 5 HERON PARK OLIVE GROVE INDUSTRIAL ESTATE OLD PAARDEURIE ROAD SOMERSET WEST</b>			
Suburb <b>JOHANNESBURG</b>		Suburb <b>SOMERSET WEST</b>			
City/Town <b>JNB</b>	Postal Code <b>2001</b>	City/Town <b>CAPE TOWN</b>	Postal Code <b>7200</b>		
Contact <b>ELLEN</b>		Contact <b>CARMEN</b>			
Phone <b>011 475 1202</b>		Phone <b>021 85177178</b>			
Destination Country	<input checked="" type="checkbox"/> South Africa	<input type="checkbox"/> Botswana	<input type="checkbox"/> Lesotho	<input type="checkbox"/> Namibia	<input type="checkbox"/> Swaziland
					Other (Please Specify)

Mark Service Required
Same Day
Express
With Sunrise Option
With Saturday Service
Public Holiday Service
<del>Economy</del>
After Hours
BLNS Customs Tariff

Sender's Reference **RED CUBES CIE** Analysis Code

**SPECIAL INSTRUCTIONS**

Bill Charges To Account No. **027766**

Bill To  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).

**LE CREUSET Clearwater**  
**16/07/18**

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

Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)
<b>2</b>		<b>300</b>	<b>200</b>	<b>200</b>

1. ONLINE

3. EFT

Total Mass (Kg)

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY) **CARMEN**

Date Received: **18 07 18** Time Received: **09 58**

Signature: **[Signature]**

Received By DSV

Name Of Courier (PLEASE PRINT CLEARLY) **Elias**

Date Received: **16 07 18** Time Received: **13 40**

Signature: **[Signature]**

