

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



2 2 2 E E E 2 2 2

SUBBD27419762

UPI: 5202474

Sender's Details

Consignee's Details. Full Street Address Please

Mark Service Required

Company Name **LE CREUSET WATERCREST**
Street Address **INANDA ROAD WATERFALL DURBAN**
Suburb
City / Town **DUR** Postal Code **3652**
Contact **Supesande**
Phone **031 763 1525**

Company Name **Le Creuset Warehouse**
Street Address **Unit 5 Heron Park Olive Grove**
Suburb **Somerset West**
City / Town **Cape Town** Postal Code **7801**
Contact **Jenna / Franci**
Phone **021 851 7178**

Same Day

Express

With Sunrise Option

With Saturday Service

Public Holiday Service

Economy

After Hours

BLNS Customs Tariff


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

Sender's Reference **Damages & the placements** 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).

 SENDER'S AUTHORISED SIGNATURE

24/10/18 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)

1

BOX

Goods received in full without damage (unless endorsed)
Name Of Receiver (PLEASE PRINT CLEARLY)

Received By DSV
Name Of Courier (PLEASE PRINT CLEARLY)

BASIL

ERIC

Date Received:

Time Received:

Date Received:

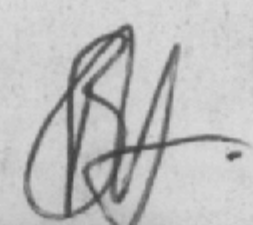
Time Received:

26 10 18

1 0 2 5

24 10 18

1 3 5 2

Signature: 

Signature: 