

Damages

CONTRACT FOR CARRIAGE / DISPATCH NOTE

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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



SUBBD27440622


Sender's Details		Consignee's Details. Full Street Address Please	
Company Name: <u>Le Creuset</u>	Company Name: <u>Le Creuset</u>	Street Address: <u>Unit 5 Heron Park Olive Grove Industrial Estate</u>	Street Address: <u>Unit 5 Heron Park Olive Grove Industrial Estate</u>
Street Address: <u>Bedford Centre Shop u 17</u>	Street Address: <u>Unit 5 Heron Park Olive Grove Industrial Estate</u>	Suburb: <u>Old PAArdevlei rd.</u>	Suburb: <u>Old PAArdevlei rd.</u>
Suburb: <u>Bedfordview</u>	Suburb: <u>Southern West</u>	City/Town: <u>Cape Town</u>	City/Town: <u>Cape Town</u>
City/Town: <u>JHB</u>	City/Town: <u>Cape Town</u>	Postal Code: <u>7130</u>	Postal Code: <u>7130</u>
Contact: <u>Mila</u>	Contact: <u>Jenna (damages)</u>	Phone: <u>021 8517178</u>	Phone: <u>021 8517178</u>
Phone: <u>011 615 1923</u>	Phone: <u>021 8517178</u>	(Please Specify)	

Mark Service Required

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

Sender's Reference: UTI 1187980 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.

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, 14.8 AND 14.7 OVERLEAF).

Sender's Authorised Signature: [Signature] DATE: 12.03.2018

a-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</u>				

Goods received in full without damage (unless endorsed)  
Name Of Receiver (PLEASE PRINT CLEARLY): ETW/NO

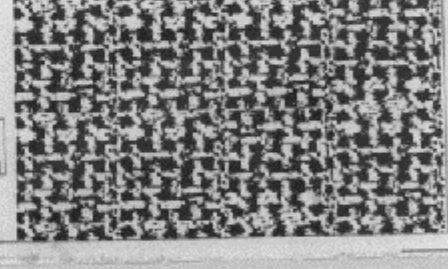
Date Received: 140318 Time Received: 1120

Signature: [Signature]

Received By DSV  
Name Of Courier (PLEASE PRINT CLEARLY): [Signature]

Date Received: 120318 Time Received: 1520

Signature: [Signature]



POD COPY

Version Control (08/2017)