

DAMAGES

CONTRACT FOR CARRIAGE / DISPATCH NOTE



2 2 2 E E E 2 2 2



DSV Road (Pty) Ltd
t/a DSV Distribution
PO Box 63, The Reeds 0061
Tel (012) 673-2000
Reg. No. 2000/D16342/07
VAT. No. 4880189685

SUBBD27440655

damages

Sender's Details

Consignee's Details. Full Street Address Please

Company Name *Lo Celeset Bedford*
Street Address *Shop U 17
Bedford centre
Snyth & Van der Linde
Bedfordview*
Suburb *Bedfordview*
City/Town *Joburg* Postal Code *2008*
Contact *M. M. M.*
Phone *04 6157923*

Company Name *Lo Celeset SA*
Street Address *Unit 5 Heron Park
Olive Grove Industrial Estate
Old, Paarldevlei rd
Somerset West*
Suburb *Somerset West*
City/Town *Cape Town* Postal Code *7129*
Contact *Heena / Renuci*
Phone *021 8517178*

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 (Please Specify)
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Sender's Reference *damages* Analysis Code

SPECIAL INSTRUCTIONS *UTI 3844047*

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 14.5 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

DATE

16/7/16

1. ONLINE

3. EFT

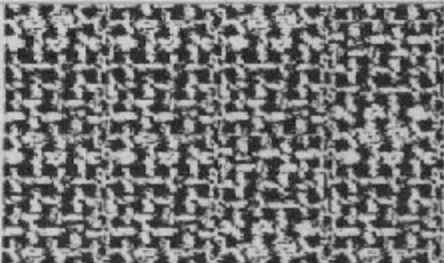
Total Mass (Kg)

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

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

Goods received in full without damage (unless endorsed)
Name Of Receiver (PLEASE PRINT CLEARLY) *BASIL*
Date Received: *190718* Time Received: *1020*
Signature: *[Signature]*

Received By DSV
Name Of Courier (PLEASE PRINT CLEARLY) *Troop*
Date Received: *170718* Time Received: *1230*
Signature: *[Signature]*



POD COPY

Version Control (03/2017)