

CONTRACT FOR CARRIAGE / DISPATCH NOTE



DSV Road (Pty) Ltd
t/a DSV Distribution
PO Box 53, The Reeds 0061
Tel (012) 673 2000
Reg. No. 2000/016342/07
VAT No. 4880189685



SUBBD27443405

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POD COPY

Sender's Details		Consignee's Details, Full Street Address Please		Mark Service Required	
Company Name	LI CREUSET NICOLWAY	Company Name	Le Creuset Sandton	<input type="checkbox"/> Same Day	<input type="checkbox"/> Express
Street Address	WILLIAM NICOL DRIVE	Street Address	Shop L339 Sandton City 158 5th street	<input type="checkbox"/> With Sunrise Option	<input type="checkbox"/> With Saturday Service
Suburb	BRYANSTON	Suburb	Sandton Ext 3	<input type="checkbox"/> Public Holiday Service	<input checked="" type="checkbox"/> Economy
City/Town	JNB	City/Town		<input type="checkbox"/> After Hours	
Postal Code	2196	Postal Code		<input type="checkbox"/> BLNS Customs Tariff	
Contact	ZANELE NGWENYA	Contact	Sarah		
Phone	011 706 2198	Phone			

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

Sender's Reference: UTIR 830458 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, 14.6 AND 14.7 OVERLEAF).

SENDER'S AUTHORISED SIGNATURE: *Doko* DATE: 08/06/18

Total Parcels: 1

NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)
1			

Total Mass (Kg): []

Goods received in full without damage (unless endorsed)		Received By DSV	
Name Of Receiver (PLEASE PRINT CLEARLY)		Name Of Courier (PLEASE PRINT CLEARLY)	
<i>K. ZANELE</i>		<i>[Signature]</i>	
Date Received:	11/06/18	Date Received:	08/06/18
Time Received:	1235	Time Received:	1500
Signature:	<i>[Signature]</i>	Signature:	<i>[Signature]</i>