

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



SUBBD27449527

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POD COPY

Sender's Details		Consignee's Details. Full Street Address Please		Mark Service Required	
Company Name	LE CREUSET PAVILION	Company Name	LE CREUSET CAPETOWN	<input type="checkbox"/> Same Day	
Street Address	SHOP UL262 PAVILION SHOPPING CENTER JACK MARRENS DRIVE	Street Address	UNITS HERONDALE ONE GROVE ESTATE, OLD PARADE ROAD	<input checked="" type="checkbox"/> Express	
Suburb	WESTVILLE	Suburb	SOMERSET WEST	<input type="checkbox"/> With Sunrise Option	
City / Town	DURBAN	City / Town	CAPETOWN	<input type="checkbox"/> With Saturday Service	
Postal Code	320	Postal Code	7130	<input type="checkbox"/> Public Holiday Service	
Contact	TRISINA / ATICHA	Contact	FRANCI / JENNA	<input type="checkbox"/> Economy	
Phone	031-260455	Phone	0218517178	<input type="checkbox"/> After Hours	

Destination Country	South Africa	Botswana	Lesotho	Namibia	Swaziland	Other (Please Specify)
Sender's Reference	INTER/COMPANY		Analysis Code			

SPECIAL INSTRUCTIONS

STOCK TAKE ADJUSTMENTS

Bill Charges To Account No. 007760

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 AUTHORIZED SIGNATURE: *[Signature]* DATE: 02/11/18

e-mail / Fax / Proof of Delivery <input type="checkbox"/>	e-mail Address / Fax Number	Total Mass (Kg)										
<table border="1"> <thead> <tr> <th>Total Parcels</th> <th>NO. OF PARCELS PER DIMENSIONS</th> <th>LENGTH (CM)</th> <th>WIDTH (CM)</th> <th>HEIGHT (CM)</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>1 X FLTR</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)	1	1 X FLTR				
Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)								
1	1 X FLTR											

Goods received in full without damage (unless endorsed)		Received By DSV	
Name Of Receiver (PLEASE PRINT CLEARLY)	Jenny	Name Of Courier (PLEASE PRINT CLEARLY)	Adom
Date Received:	05/11/18	Date Received:	02/11/18
Time Received:	0958	Time Received:	1650
Signature:	<i>[Signature]</i>	Signature:	<i>[Signature]</i>

Version Control (08/2017)