

CONTRACT FOR CARRIAGE / DISPATCH NOTE



DSV Road (Pty) Ltd
t/a DSV Distribution
PO Box 68, The Reeds 0061
Tel (012) 673-2000
Reg. No. 2000/016342/07
VAT. No. 4880189685



SUBBD27502767

2 2 2 E E E 2 2 2

Banner
2x Table
Cloths

Sender's Details				Consignee's Details. Full Street Address Please				Mark Service Required	
Company Name: <u>Le Creuset</u>				Company Name: <u>Le Creuset Warehouse</u>				Same Day	
Street Address: <u>Shop 103</u>				Street Address: <u>Unit 5 Heron Park</u>				Express	
<u>Wolmer Park Shopping</u>				<u>Olive Grove, Industrial Estate</u>				With Sunrise Option	
<u>Centre</u>				<u>Old Paardevlei Road</u>				With Saturday Service	
Suburb: <u>Wolmer Park</u>				Suburb: <u>Somerset West</u>				Public Holiday Service	
City / Town: <u>P. E</u>		Postal Code: <u>6001</u>		City / Town: <u>Cape Town</u>		Postal Code: <u>7100</u>		Economy <input checked="" type="checkbox"/>	
Contact: <u>Rene Newfeldt</u>				Contact: <u>Carmen</u>				After Hours	
Phone: <u>041 367 2318</u>				Phone: <u>021 851 7178</u>				BLNS Customs Tariff	
Destination Country		South Africa		Botswana		Lesotho		Namibia	
		Swaziland		Other		(Please Specify)			
Sender's Reference				Analysis Code				1. ONLINE <input type="checkbox"/>	
SPECIAL INSTRUCTIONS									
Bill Charges To Account No. <u>27766</u>		Bill To <input type="checkbox"/> Sender		Consignee <input type="checkbox"/>		Other <input type="checkbox"/> (Name Please)		3. EFT <input type="checkbox"/>	
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).									
e-mail / Fax / Proof of Delivery <input type="checkbox"/>						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) <u>J & N NAY</u>					Received By DSV Name Of Courier (PLEASE PRINT CLEARLY) <u>ZAMA</u>				
Date Received: <u>29/11/18</u>		Time Received: <u>10:30</u>		Date Received: <u>28/11/18</u>		Time Received: <u>15:30</u>		Total Mass (Kg)	
Signature: <u>[Signature]</u>					Signature: <u>[Signature]</u>				

POD COPY

28/11/2018

Version Control (06/2017)