

CONTRACT FOR CARRIAGE / DISPATCH NOTE

Batkebo 4

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. 2000/016342/07  
VAT. No. 4880189685



SUBBD27555112


Sender's Details		Consignee's Details. Full Street Address Please	
Company Name: <u>Le Clouset Baywest</u>	Company Name: <u>Le Clouset Waterfront</u>	Street Address: <u>Shop LA 43</u>	Street Address: <u>Shop 6197</u>
Street Address: <u>Baywest Mall</u>	Street Address: <u>Victoria Wharf Centre</u>	Suburb: <u>N2</u>	Suburb: <u>VEA Water Front</u>
City/Town: <u>R.E.</u>	City/Town: <u>Cape Town</u>	Postal Code: <u>6001</u>	Postal Code: <u>8001</u>
Contact: <u>René Nienfeldt</u>	Contact: <u>Cindy Petersen</u>	Phone: <u>041 004 0011</u>	Phone: <u>021 431 8501</u>

Mark Service Required

Same Day

Express

With Sunrise Option

With Saturday Service

Public Holiday Service

Economy

After Hours

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

Sender's Reference: UT104A1374 Analysis Code: \_\_\_\_\_

**SPECIAL INSTRUCTIONS**

Bill Charges To Account No. 27766

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).

[Signature] SENDER'S AUTHORISED SIGNATURE DATE: 09.02.18

BLNS Customs Tariff

1. ONLINE

3. EFT

e-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>	<u>1</u>	<u>33</u>	<u>31</u>	<u>19</u>

Total Mass (Kg)

2

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY): NANDI PHA

Date Received: 120218 Time Received: 1402

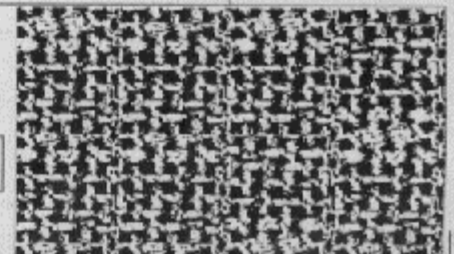
Signature: [Signature]

Received By DSV

Name Of Courier (PLEASE PRINT CLEARLY): \_\_\_\_\_

Date Received: DDMMYY Time Received: HHMM

Signature: \_\_\_\_\_



POD COPY

Version Control: (04/2017)