

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



SUBBD27574598

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SUBMIT 1 3 4 6 4 3 3 4
 SUBMIT 1 3 4 6 4 3 3 5

1	3	4	6	4	3	3	4
1	3	4	6	4	3	3	5

Sender's Details		Consignee's Details. Full Street Address Please				Mark Service Required	
Company Name LE CREUSET JHB		Company Name LE CREUSET				<input type="checkbox"/> Same Day	
Street Address UNIT 4, EASTGATE BUSINESS PARK, CORNER MARLBORO DRIVE & SOUTH ROAD		Street Address UNIT 5 HERON PARK OLIVE GROVE STATE BUSINESS PARK, 1 OLD PAAROWLEI ROAD				<input type="checkbox"/> Express	
Suburb SANDTON		Suburb SOMERSET WEST				<input type="checkbox"/> With Sunrise Option	
City / Town JHB	Postal Code	City / Town CPT	Postal Code 7130	<input type="checkbox"/> With Saturday Service		<input checked="" type="checkbox"/> Economy	
Contact DWAYNE	Phone 0735052470	Contact FRANCI	Phone 021851 7178	<input type="checkbox"/> Public Holiday Service		<input type="checkbox"/> After Hours	
Destination Country		South Africa		Botswana		Lesotho	
Destination Country		Namibia		Swaziland		Other (Please Specify)	
Sender's Reference COMPUTER		Analysis Code		BLNS Customs Tariff		1. ONLINE <input type="checkbox"/>	
SPECIAL INSTRUCTIONS FRAGILE, PLEASE HANDLE WITH CARE		If Consignee Or Other (Third Party) Is Billed, Sender Remains Liable For Unpaid Charges.		3. EFT <input type="checkbox"/>		Total Mass (Kg) 21Kg	
Bill Charges To Account No. 027766		Bill To <input type="checkbox"/> Sender		Consignee <input type="checkbox"/>		Other (Name Please) <input type="checkbox"/>	
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		SENDER'S AUTHORISED SIGNATURE Dwayne		DATE 03/09/2018	
Total Parcels 3		NO. OF PARCELS PER DIMENSIONS		LENGTH (CM) 59		WIDTH (CM) 20	
				51		49	
				52		36	
						36	
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY) BASIL				Received By DSV Name Of Courier (PLEASE PRINT CLEARLY) MURPHY			
Date Received: 060918		Time Received: 1000		Date Received: 060918		Time Received: 1500	
Signature:				Signature:			

POD COPY

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