

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



SUBBD27574601

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SUBHT 13464333

<b>Sender's Details</b> Company Name: <b>LE CREUSET JHB</b> Street Address: <b>UNIT 4, CORNER MARLBOROUGH DRIVE &amp; SOUTH ROAD EASTGATE BUSINESS PARK SANDTON</b> City/Town: <b>JHB</b> Postal Code: _____ Contact: <b>OUTRAGE</b> Phone: <b>073 505 2470</b>		<b>Consignee's Details. Full Street Address Please</b> Company Name: <b>KLOPPERS BLOEMFONTEIN</b> Street Address: <b>LOCH LOGAN WATERFRONT HENRY STREET BLOEMFONTEIN</b> City/Town: <b>BLOEMFONTEIN</b> Postal Code: <b>9301</b> Contact: <b>ALIDA ROOLS</b> Phone: <b>051 400 5500</b>		Mark Service Required <input type="checkbox"/> Same Day <input type="checkbox"/> Express <input type="checkbox"/> With Sunrise Option <input type="checkbox"/> With Saturday Service <input type="checkbox"/> Public Holiday Service <input checked="" type="checkbox"/> Economy <input type="checkbox"/> After Hours BLNS Customs Tariff		
Destination Country: South Africa		Destination Country: <b>KLOPPERS</b>		1. ONLINE <input type="checkbox"/>  3. EFT <input type="checkbox"/>		
Sender's Reference: <b>STOCK</b>		Analysis Code: <b>LOCH LOGAN WATERFRONT POSBUS 20671 DANHOF 9310</b>				
SPECIAL INSTRUCTIONS: <b>FRAGILE</b>		<b>CONTENTS NOT CHECKED</b>		SENDER'S AUTHORIZED SIGNATURE: <i>[Signature]</i> DATE: <b>03/09/2018</b>		
Bill Charges To Account No.: <b>027766</b>					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 R250.00 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).						
Total Parcels: <b>2</b>		NO. OF PARCELS PER DIMENSIONS: <b>2</b>	LENGTH (CM): <b>51</b>	WIDTH (CM): <b>49</b>	HEIGHT (CM): <b>36</b>	Total Mass (Kg): <b>35Kg</b>
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY): _____ Date Received: <b>05 09 18</b>		Received By DSV Name Of Courier (PLEASE PRINT CLEARLY): <b>WALLOU</b> Date Received: <b>04 09 18</b> Time Received: <b>18 50</b>		Signature: <i>[Signature]</i>		

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Revision Control (08/2011)