

CONTRACT FOR CARRIAGE / DISPATCH NOTE



DSV Road (Pty) Ltd
 Va DSV Distribution
 PO Box 63/Pho Reeds 0061
 Tel (012) 673 2000
 Reg. No. 2000/016342/07
 VAT No. 4880189685



SUBBD27638794

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Sender's Details

Company Name **ATM SOLUTIONS**
 Street Address **7 DELPHI STREET**
 Suburb **SANDTON**
 City/Town **JNB** Postal Code **2196**
 Contact **MORATUWA**
 Phone **011 555 5500 / 073 047 7017**

Consignee's Details. Full Street Address Please

Company Name **ATM Solution Portshepstone**
 Street Address **HOLD**
 Suburb
 City/Town **Portshepstone** Postal Code
 Contact **KISHAL**
 Phone **083 607 8064**

Mark Service Required

- Same Day
- Express
- With Sunrise Option
- With Saturday Service
- Public Holiday Service
- Economy
- After Hours

BLNS
 Customs
 Tariff

- 1. ONLINE
- 3. EFT

Total Mass (Kg)

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

Sender's Reference

Analysis Code

SPECIAL INSTRUCTIONS

Bill Charges To Account No. **027766**
 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]
 29/1/19
 DATE

e-mail / Fax / Proof of Delivery e-mail Address / Fax Number

Total Parcels

NO. OF PARCELS PER DIMENSIONS

LENGTH (CM)

WIDTH (CM)

HEIGHT (CM)

1

Goods received in full without damage (unless endorsed)
 Name Of Receiver (PLEASE PRINT CLEARLY)

KISHAL

Date Received: **01/02/19** Time Received: **10/103**

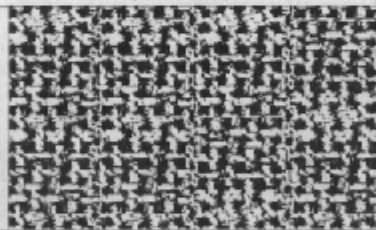
Signature: *[Signature]*

Received By DSV
 Name Of Courier (PLEASE PRINT CLEARLY)

SRV

Date Received: **30/01/19** Time Received: **1439**

Signature: *[Signature]*



POD COPY